

CHAPTER 1

HISTORICAL AND CONTEMPORARY NURSING PRACTICE

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--------------------------------------|--|
| 1. _____ Caregiver | a. Degree of well- ness or well- being that the cli- ent experiences |
| 2. _____ Client | b. Establish pre- treatment diagnosis billing categories |
| 3. _____ Client advocate | c. Process of helping a client to recognize and cope with stressful psy- chologic or social problems; to promote personal growth |
| 4. _____ Counseling | d. Process by which people learn to become members of groups and so- cieties |
| 5. _____ Diagnosis-related groups | e. Influences others to work together to accomplish a specific goal |
| 6. _____ Health | f. An occupation that requires extensive education |
| 7. _____ Leader | g. Recipient of nursing care |
| 8. _____ Manager | h. A role that traditionally included those activities that assist the client physically |
| 9. _____ Nursing | i. Nursing role of pleading the cause of a client |
| 10. _____ Profession | j. Attributes, characteristics, and actions of the nurse providing care on behalf of, or in conjunction with, the client |
| 11. _____ Socialization | k. A role that requires knowledge about organizational structure, leader- ship, advocacy, delegation, supervision, and evaluation |

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KEY TOPIC REVIEW

1. The four functions identified within the scope of nursing practice are:
 - a.
 - b.
 - c.
 - d.
2. The role of religious orders on the development of nursing includes:
 - a. instilling the values of hard work.
 - b. influencing the image of nursing.
 - c. identifying an increased need for nurses.
 - d. imprinting the profession as involving hard work.
 - e. improving the status of nursing.
3. The contemporary nursing leader who defined nursing is:
 - a. Clara Barton.
 - b. Florence Nightingale.
 - c. Linda Richards.
 - d. Virginia Henderson.
4. A nurse registered to practice in one state is relocating to another neighboring state. What should this nurse do to ensure the ability to work as a nurse in the new state?
 - a. Nothing. The nurse is registered as a nurse.
 - b. Contact the state's department of nursing.
 - c. Enroll in a school of nursing in the new state.
 - d. File the paperwork to take the new state's nursing licensing examination.
5. From the following list, select the definition that best defines these terms:

| | |
|----------------------|---|
| a. Caregiver | _____ Helps the client modify behaviors. |
| b. Communicator | _____ This can be provided by the nurse or delegated to someone else. |
| c. Teacher | _____ Supervises and evaluates performance. |
| d. Client advocate | _____ Sensitive to protecting the rights of human subjects. |
| e. Counselor | _____ Acts to protect the client. |
| f. Change agent | _____ Influences others to work together to reach a common goal. |
| g. Leader | _____ Done verbally or written. |
| h. Manager | _____ Care is oriented to the client and controls costs. |
| i. Case manager | _____ Helps promote personal growth. |
| j. Research consumer | _____ Assess readiness to learn. |

4 CHAPTER 1 / Historical and Contemporary Nursing Practice

4. How have economics, consumer demands, and the family structure impacted the profession of nursing?
5. A nurse who has been in the profession for over 25 years does not know how to operate a computer. What suggestions do you have to help this nurse? Why should this nurse be concerned with the inability to utilize current technology?
6. Identify the reasons for the current nursing shortage. How will this affect the future education of new nurses entering the profession?
7. The nurses in a hospital are contacting a labor union. Why do you think the nurses are contacting this union? What benefits will be gained by working with a union? What disadvantages are associated with nurses working with a union?
8. What do Sigma Theta Tau and the Association of Colleges of Nursing (ACN) represent in nursing? What are the differences between the two organizations and what are the similarities? Which organization offers continuing units for nurses? Compare these organizations with others such as American Nursing Association (ANA) and the American Academy of Colleges in Nursing (AACN).

CASE STUDY

A client with adult-onset asthma is attempting to quit his two-pack-per-day tobacco habit. The nurse, who has been practicing for 4 years, is assisting the client with supportive measures to improve his health status. The nurse is discussing the plan of care with the physician.

1. What role is the nurse acting in by representing the client's needs and wishes and assisting the client in behavior modification plans?
2. The nurse is in the process of assisting the client to recognize and cope with both the asthma condition and the tobacco cessation program. The nurse is acting as a change agent, and what other role is the nurse representing?
3. According to Benner's stages of nursing expertise, in what stage is the nurse functioning?

REVIEW QUESTIONS

1. A female is considering a career as a nurse because of the aspects of caring and nurturing. This individual is using which factor of nursing to base her decision?
 1. Women's roles
 2. Religion
 3. War
 4. Economics
2. A registered nurse is considering additional education so that she can provide non-emergent acute care in an ambulatory clinic. This nurse is considering which expanded career role?
 1. Nurse anesthetist
 2. Clinical nurse specialist
 3. Nurse practitioner
 4. Nurse administrator

6. The terms used to identify the recipients of nursing are:
 - a.
 - b.
 - c.
7. Of the following nursing roles, select the ones that provide more autonomy within the practice of nursing.
 - a. Nurse anesthetist
 - b. Staff nurse on an orthopedic unit
 - c. Operating room nurse
 - d. Clinical nurse specialist
 - e. Nurse in a physician's office
8. The process a nurse undergoes in an effort to be viewed as an integral member of the discipline of nursing is termed _____.
9. A nurse is interested in participating with the American Nurses Association. Participating with this organization is an example of:
 - a. autonomy.
 - b. governance.
 - c. extended education.
 - d. service.
10. The purpose of nursing students working together on projects is to:
 - a. begin the process of socialization into the profession.
 - b. get more work done faster.
 - c. help each other through difficult courses.
 - d. make new friends.
11. The payments for hospital services implemented by Medicare are termed _____ (DRGs).
12. A nurse who provides care to a patient over the telephone will need to:
 - a. obtain licensure in the patient's state of residence.
 - b. take a course in telenursing.
 - c. find out if the patient's state is one of mutual recognition for licensure.
 - d. do nothing.
13. The Patient Self-Determination Act requires that every patient be provided with _____ and _____.

FOCUSED STUDY TIPS

1. Why is it important to review the history of nursing as one of the first steps in the education of a new nurse? What value does understanding the history of nursing provide to the contemporary nursing student?
2. What are the characteristics of a profession? How does nursing address each of these characteristics?
3. What are Benner's five stages of nursing practice? In which stage is a nurse considered proficient? Why?

3. A nurse is able to provide care to several complex clients and focuses on those items that are the most important. Within which stage of Benner's stages of nursing expertise is this nurse functioning?
 1. Stage II
 2. Stage III
 3. Stage IV
 4. Stage V
4. The health care organization is having difficulty recruiting and retaining nurses. Which of the following nursing shortage factors is this organization experiencing?
 1. Aging workforce
 2. Aging population
 3. Increased demand for nurses
 4. Workplace issues
5. Which of the following can be viewed as an effort by an organization to improve the image of nursing?
 1. Offering scholarships to high school students to attend nursing school
 2. Television commercials showing nurses and doctors providing care together
 3. A print advertisement with the statement "Nursing—The hardest job you'll ever love"
 4. An ANA-sponsored radio commercial explaining the role of nurses in society today
6. A nurse providing care in a well-baby clinic is practicing within which area of nursing practice?
 1. Promoting health and wellness
 2. Preventing illness
 3. Restoring health
 4. Providing care to the dying
7. While attending a continuing education seminar, several nurses from different states are discussing their individual state requirements for nursing licensure. Which of the following is the one common thread between all of the states' departments of nursing?
 1. Protect the public.
 2. Further nursing education.
 3. Obtain continuing education contact hours.
 4. Gain specialization.
8. A new nursing student is disappointed because classes so far are focused on topics such as communication and planning, and she wanted to be a nurse to "provide care." This nursing student is describing which role of the nurse?
 1. Teacher
 2. Client advocate
 3. Caregiver
 4. Counselor

9. A graduate nurse is learning different aspects of the nursing profession while maintaining a sense of responsibility and accountability. The process this nurse is learning is:
 1. case manager.
 2. professionalization.
 3. socialization.
 4. governance.
10. An article appears in a nursing journal identifying one area of the United States with unusually high numbers of individuals with type 2 diabetes. This information would be considered:
 1. news.
 2. health statistics.
 3. a targeted area of study.
 4. demography.

CHAPTER 2

EVIDENCE-BASED PRACTICE AND RESEARCH IN NURSING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|----------------------------------|--|
| 1. _____ Comparative analysis | a. The presumed cause of, or influence on another |
| 2. _____ Confidentiality | b. Detailed instructions |
| 3. _____ Cost-benefit analysis | c. Completeness and conceptual accuracy of measures |
| 4. _____ Dependent variable | d. Involves consideration of potential risks and benefits of implementing a change or not implementing a change |
| 5. _____ Evidence-based practice | e. Assessing study findings for their implementation potential |
| 6. _____ Hypothesis | f. A predictive statement about the relationship between two or more variables |
| 7. _____ Independent variable | g. A behavior, characteristic, or outcome the researcher wishes to explain or predict |
| 8. _____ Methodology | h. Refers to the consistency of measures |
| 9. _____ Naturalism | i. Means that any information a participant relates will not be made public or available to others without the participant's consent |
| 10. _____ Protocol | j. A philosophical perspective that maintains that reality is relative or contextual and is constructed by individuals who are experiencing a phenomenon |
| 11. _____ Reliability | k. The logistics or mechanics of a study |
| 12. _____ Validity | l. Using research findings and other sources of evidence to guide decisions about client care |

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KEY TOPIC REVIEW

1. _____ is clinical decision making based on the simultaneous use of the best evidence, clinical expertise and patients' values.
2. The four rights of human subjects that nurses must safeguard are:
 - a.
 - b.
 - c.
 - d.
3. The term _____ means that any information a client relates will not be made public or available to others without the patient's consent.
4. What is the definition of research?
5. According to the "Standards of Clinical Nursing" published by the ANA (1998), _____ is included as one of the standards of professional performance.
6. Select and mark either (1) for quantitative research or (2) for qualitative research for the following items in regards to research:
 - a. _____ Associated with naturalistic inquiry that explores subjective and complex experiences of human beings
 - b. _____ Data collection and analysis occur concurrently
 - c. _____ A systematic, logical sequence based on a specific plan designed to collect information in controlled conditions; analyzed using statistical procedures
 - d. _____ Theory or framework is developed after the data are analyzed to identify patterns and/or themes
 - e. _____ Viewed as "hard science"
7. Change in practice requires: (Select all that apply.)
 - a. Assessing the need for change.
 - b. Locating and analyzing the best evidence.
 - c. Provides nurses with information essential to nursing practice.
 - d. Integrating and maintaining the change.
 - e. Implementing and evaluating the practice change.
8. Correctly identify the order of the steps in conducting quantitative research:
 - a. Review the related literature.
 - b. Communicate conclusions and implications.
 - c. Define the study's purpose or rationale.
 - d. Conduct a pilot study.
 - e. Analyze the data.
 - f. Formulate hypotheses and define variables.
 - g. Collect the data.
 - h. Select the population, sample, and setting.
 - i. State a research question or problem.
 - j. Select a research design to test the hypothesis.

9. From the following list, select the definition that best defines the elements of an ideal study.
- | | |
|---------------------------|---|
| a. Research problem | _____ Protection of human rights, standards of beneficence, respect for human dignity, approved by Institutional Review Board. |
| b. Review of literature | _____ Is appropriate, clearly informs, enhances study |
| c. Study framework | _____ Significant, addresses an issue that is important to nursing, addresses a researchable problem, is feasible to address in a study setting |
| d. Data collection | _____ Relevant, thorough, current, authoritative |
| e. Ethical considerations | _____ Appropriate for variables and sample, yields appropriate level of measure, reliable and valid, safe and humane |
10. Describe the two major approaches nurse researchers use to investigate client's responses to health alterations and nursing interventions.
- -
11. The bachelor of science in nursing (BSN) is the usual level of preparation for the research nurse who:
- conducts independent research.
 - focuses on the evaluation and use of research.
 - evaluates research findings.
 - understands and applies research findings from nursing and other disciplines in clinical practice.
12. According to the "Standards of Clinical Nursing" published by the ANA (1998), research is included as one of the standards of professional performance.
- True
 - False
13. Qualitative research uses measurement in its methods.
- True
 - False
14. _____ pertains to the availability of time as well as the material and human resources needed to investigate a research problem or question.
15. A _____ is conducted prior to the actual study to assess the adequacy of the data collection plan and to identify any potential flaws in the study.

FOCUSED STUDY TIPS

- What are data collection strategies that nurse researchers use?
- Describe research questions for which a quantitative approach to research is useful.
 -
 -
 -

3. List three examples of documented nursing research in nursing magazines.
4. Which right of research study participants do you think is overlooked most often? Explain.
5. List four ways for a nurse to provide for patient confidentiality.

CASE STUDY

Go to the following article at the AHRQ.org site: When is Evidence Sufficient? Then answer the following critical thinking questions.

1. What are the implications addressing gaps in the research base?
2. Why is value-of-information analysis important?

REVIEW QUESTIONS

1. Which of the following is a violation of a client's right to self-determination?
 1. Hidden inducements
 2. Sharing a client's information with a pharmaceutical company
 3. Providing basic care to the client
 4. Giving the client information about what participating in the study will involve
2. Upon successful completion of the NCLEX-RN®, the registered nurse is asked to participate in a research study on the coping and adjustment skills of a newly graduated registered nurse. The plan is to use an oral, recorded interview with a grounded theory. What type of research study is being conducted?
 1. Pilot study
 2. Quantitative study
 3. Qualitative study
 4. Ethnographic study
3. Which of the following activities are examples of how a professional nurse may participate in research? (Select all that apply.)
 1. Critiquing research for application to practice
 2. Identifying clinical problems suitable for nursing research
 3. Encouraging patient participation in a study without informed consent
 4. Using research findings in the development of policies, procedures, and practice guidelines for patient care
4. A nursing student documents the client's full name and date of birth on the required paperwork for the clinical course and turns it in to the instructor. Which of the following client rights is being violated?
 1. Right not to be harmed
 2. Right to full disclosure
 3. Right of self-determination
 4. Right of privacy and confidentiality

5. Which of the following identifies the "C" in PICO?
 1. Comprehension
 2. Comparison
 3. Challenging
 4. Confidentiality
6. Formulating a research problem is often facilitated by the researcher performing:
 1. a feasibility study.
 2. a literature review.
 3. a methodology evaluation.
 4. a pilot study.
7. Data analysis involves the application of which of the following procedures? (Select all that apply.)
 1. Descriptive statistics
 2. Inferential statistics
 3. Measures of central tendency
 4. Measures of variability
8. Continuing education is the responsibility of the nurse to keep abreast of _____ and _____ changes and also changes within the nursing profession.
 1. Scientific and technological
 2. Medical and technological
 3. Scientific and human responses
 4. Cardiac and neurological
9. As a nurse researcher, what is involved in the research project? (Select all that apply.)
 1. Identifying a research question or problem
 2. Writing a thesis paper
 3. Collecting data using various means such as computer searches and/or questionnaires
 4. Analyzing the data and writing up the results
 5. Publishing or presenting the research findings to expand the body of nursing knowledge
10. One of the major nursing responsibilities of nursing research that the nurse has is:
 1. encouraging participation of the clients in nursing research.
 2. being aware of and advocating on behalf of the client's rights.
 3. exposing the client to the possibility of injury from the research.
 4. pressuring the client into participating in the study.

7. There are two types of legal actions: civil action and criminal action. Choose the correct definition of criminal action, the correct example of criminal action, and the potential results if a person is found guilty in a criminal trial.
 - a. Deals with the relationships among individuals in society.
 - b. Deals with disputes between an individual and the society as a whole.
 - c. If found guilty, the defendant may have to pay a sum of money.
 - d. If found guilty, the defendant may lose money, be jailed, be executed, and/or lose any professional licenses.
 - e. One example of this type of legal infraction is a nurse who deliberately delivers a lethal dose of medication to a client.
 - f. One example of this type of legal action is a malpractice suit.
8. The action of a lawsuit is called _____.
9. Organize the following five steps in the civil judicial process according to the procedural rules.
 - a. A document, called a complaint, is filed by a person referred to as the plaintiff, who claims that his or her legal rights have been infringed on by one or more other persons or entities, referred to as defendants.
 - b. In the trial of the case, all the relevant facts are presented to a jury or only to a judge.
 - c. The judge renders a decision, or the jury renders a verdict. If the outcome is not acceptable to one of the parties, an appeal can be made for another trial.
 - d. Both parties engage in pretrial activities, referred to as discovery, in an effort to obtain all the facts of the situation.
 - e. A written response, called an answer, is made by the defendants.
10. What is the legal purpose for defining the scope of nursing, licensing requirements, and standards of care? (Select all that apply.)
 - a. For the protection of the nurse
 - b. For the protection of the client
 - c. For the protection of the public
 - d. Maintain client confidentiality
 - e. For the protection of the physician
11. Each state has an obligation to define its scope of nursing practice and licensing requirements in accordance with the neighboring states.
 - a. True
 - b. False
12. The name of the newly developed regulatory model is the _____ model. It allows for multistate licensure for nurses. Nurses can practice in states bordering their own state if both states have an _____ compact.
13. _____ is the voluntary practice of validating that an individual nurse has met minimum standards of nursing competence in specialty areas such as maternal-child health, pediatrics, mental health, gerontology, and school nursing.
14. Define standards of care and list the two classifications.
 - a.
 - b.

KEY TOPIC REVIEW

1. Define theory. List two characteristics of a theory.
2. What is the main function of theory (and research) in a practice discipline?
3. During the latter half of the 20th century, disciplines seeking to establish themselves in universities had to demonstrate something that Nightingale had not envisioned for nursing—a unique body of theoretical knowledge.
 - a. True
 - b. False
4. Disciplines without a strong theory and research base were referred to as “_____,” a negative comparison with the “_____” natural sciences.
5. What is the term encompassing the “building blocks” of theories? _____
6. A _____ is a group of related ideas, statements, or concepts. It may also be called _____ theories or _____.
7. _____ refers to a pattern of shared understandings and assumptions about reality and the world. It includes a person’s notions of reality that are largely unconscious or taken for granted.
8. What four major concepts are related to the metaparadigm for nursing?
9. According to Figure 3-1 in your textbook, what are some foundational theories prevalent in nursing?
10. Match each theorist with the appropriate term: philosophies, conceptual models, or midlevel theories.

| | | |
|----------------------|-------|-------------|
| a. Philosophies | _____ | Orem |
| b. Conceptual models | _____ | Nightingale |
| c. Midlevel theories | _____ | Peplau |
| | _____ | Parse |
| | _____ | Henderson |
| | _____ | Roy |
| | _____ | Neuman |
| | _____ | Rogers |
| | _____ | Leininger |
| | _____ | Watson |
| | _____ | King |
11. Who is considered to be the first nurse theorist?
12. An early effort to define nursing phenomena, _____ serves as the basis for later theoretical formulations.
13. Debates about the role of theory in nursing practice provide evidence that nursing is maturing as both an academic discipline and a clinical profession.
 - a. True
 - b. False

CHAPTER 4

LEGAL ASPECTS OF NURSING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|------------------------------|--|
| 1. _____ Assault | 18. _____ Libel |
| 2. _____ Autopsy | 19. _____ Living will |
| 3. _____ Battery | 20. _____ Mandated reporters |
| 4. _____ Breach of duty | 21. _____ Plaintiff |
| 5. _____ Burden of proof | 22. _____ <i>Respondeat superior</i> |
| 6. _____ Causation | 23. _____ Right |
| 7. _____ Civil law | 24. _____ Tort Law |
| 8. _____ Common law | 25. _____ Unprofessional conduct |
| 9. _____ Complaint | |
| 10. _____ Contract | a. Laws evolving from court decisions |
| 11. _____ Defamation | b. Harm occurred as a direct result of failure to follow standard of care |
| 12. _____ Euthanasia | c. Examination of the body after death |
| 13. _____ False imprisonment | d. Agreement between competent persons, on sufficient consideration to do or not do a legal act |
| 14. _____ Informed consent | e. Communication that is false, and results in injury to reputation of a person |
| 15. _____ Injury | f. Defines and enforces duties and rights among private individuals that are not based on contractual agreements |
| 16. _____ Interstate compact | g. Defamation by means of print, writing, or pictures |
| 17. _____ Liability | h. The requirement that by law, requires [nurses] to report abuse, neglect, or exploitation |
| | i. Document filed by a person claiming that legal rights have been infringed upon. |
| | j. A standard of care that is not observed |

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REVIEW QUESTIONS

1. A supposition or system of ideas that is proposed to explain a given phenomenon or something significant is called a:
 1. concept.
 2. theory.
 3. paradigm.
 4. conceptual model.
2. Some examples of concepts, which are defined as labels given to ideas, objects, or events, are:
 1. intelligence, motivation, and obesity.
 2. comfort, fatigue, pain, depression, and/or environment.
 3. self-care, adaptation, caring, behavioral system, and/or nurse-client transactions.
 4. humanistic endeavors, unitary man, and/or learned helplessness.
3. Which theorist addresses hospice nursing issues during end-of-life care?
 1. Imogene King
 2. Callista Roy
 3. Dorothea Orem
 4. Jean Watson
4. An example of a middle-range nursing theory is:
 1. Peplau's psychodynamic nursing model.
 2. Jean Watson's model of human caring.
 3. Roy's adaptation model.
 4. Imogene King's theory of goal attainment.
5. This theorist based her theory of nursing on the principle that nursing assists clients with 14 essential functions that move them toward independence.
 1. Myra Estrin Levine
 2. Dorethea Orem
 3. Madeline Leininger
 4. Virginia Henderson
6. One of the goals of Betty Neuman's health care systems model is:
 1. maintenance of system equilibrium.
 2. assisting the client to achieve the highest level of self-care.
 3. promoting internal and external stimuli that influence the client's well-being.
 4. to heal the client and make the bed available for sicker clients.

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KEY TOPIC REVIEW

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3. During the latter half of the 20th century, disciplines seeking to establish themselves in universities had to demonstrate something that Nightingale had not envisioned for nursing—a unique body of theoretical knowledge.
 - a. True
 - b. False
4. Disciplines without a strong theory and research base were referred to as “_____,” a negative comparison with the “_____” natural sciences.
5. What is the term encompassing the “building blocks” of theories? _____
6. A _____ is a group of related ideas, statements, or concepts. It may also be called _____ theories or _____.
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13. Debates about the role of theory in nursing practice provide evidence that nursing is maturing as both an academic discipline and a clinical profession.
 - a. True
 - b. False

7. There are two types of legal actions: civil action and criminal action. Choose the correct definition of criminal action, the correct example of criminal action, and the potential results if a person is found guilty in a criminal trial.
 - a. Deals with the relationships among individuals in society.
 - b. Deals with disputes between an individual and the society as a whole.
 - c. If found guilty, the defendant may have to pay a sum of money.
 - d. If found guilty, the defendant may lose money, be jailed, be executed, and/or lose any professional licenses.
 - e. One example of this type of legal infraction is a nurse who deliberately delivers a lethal dose of medication to a client.
 - f. One example of this type of legal action is a malpractice suit.
8. The action of a lawsuit is called _____.
9. Organize the following five steps in the civil judicial process according to the procedural rules.
 - a. A document, called a complaint, is filed by a person referred to as the plaintiff, who claims that his or her legal rights have been infringed on by one or more other persons or entities, referred to as defendants.
 - b. In the trial of the case, all the relevant facts are presented to a jury or only to a judge.
 - c. The judge renders a decision, or the jury renders a verdict. If the outcome is not acceptable to one of the parties, an appeal can be made for another trial.
 - d. Both parties engage in prefrial activities, referred to as discovery, in an effort to obtain all the facts of the situation.
 - e. A written response, called an answer, is made by the defendants.
10. What is the legal purpose for defining the scope of nursing, licensing requirements, and standards of care? (Select all that apply.)
 - a. For the protection of the nurse
 - b. For the protection of the client
 - c. For the protection of the public
 - d. Maintain client confidentiality
 - e. For the protection of the physician
11. Each state has an obligation to define its scope of nursing practice and licensing requirements in accordance with the neighboring states.
 - a. True
 - b. False
12. The name of the newly developed regulatory model is the _____ model. It allows for multistate licensure for nurses. Nurses can practice in states bordering their own state if both states have an _____ compact.
13. _____ is the voluntary practice of validating that an individual nurse has met minimum standards of nursing competence in specialty areas such as maternal-child health, pediatrics, mental health, gerontology, and school nursing.
14. Define standards of care and list the two classifications.
 - a.
 - b.

5. Which of the following identifies the "C" in PICO?
 1. Comprehension
 2. Comparison
 3. Challenging
 4. Confidentiality
6. Formulating a research problem is often facilitated by the researcher performing:
 1. a feasibility study.
 2. a literature review.
 3. a methodology evaluation.
 4. a pilot study.
7. Data analysis involves the application of which of the following procedures? (Select all that apply.)
 1. Descriptive statistics
 2. Inferential statistics
 3. Measures of central tendency
 4. Measures of variability
8. Continuing education is the responsibility of the nurse to keep abreast of _____ and _____ changes and also changes within the nursing profession.
 1. Scientific and technological
 2. Medical and technological
 3. Scientific and human responses
 4. Cardiac and neurological
9. As a nurse researcher, what is involved in the research project? (Select all that apply.)
 1. Identifying a research question or problem
 2. Writing a thesis paper
 3. Collecting data using various means such as computer searches and/or questionnaires
 4. Analyzing the data and writing up the results
 5. Publishing or presenting the research findings to expand the body of nursing knowledge
10. One of the major nursing responsibilities of nursing research that the nurse has is:
 1. encouraging participation of the clients in nursing research.
 2. being aware of and advocating on behalf of the client's rights.
 3. exposing the client to the possibility of injury from the research.
 4. pressuring the client into participating in the study.

- d. Do-not-resuscitate orders (DNRs):
 - e. Euthanasia:
 - f. Inquests:
 - g. Organ donation:
30. _____ law is usually involved with nursing liability.
 31. Choose the types of invasion that the client must be protected from:
 - a. Reporting the number of births that occurred in the hospital for statistical analysis
 - b. Reporting of infections and communicable diseases
 - c. Taking photographs or having nursing students observe the client's care without the client's consent
 - d. Revealing the name of a client who was treated for domestic violence
 - e. Reporting violent incidents to the local authorities
 32. What is the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and why is it important? What are the four specific areas of HIPAA? Refer to the HIPAA website found on the Companion Website.
 33. What are four categories that nurses must question to protect themselves legally when carrying out physician's orders?

FOCUSED STUDY TIPS

1. Define and give an example of the following laws. Which is the highest level of law?
 - a. Civil law:
 - b. Common law:
 - c. Contract law:
 - d. Law:
 - e. Private law:
 - f. Public law:
 - g. Statutory law:
 - h. Tort law:
2. Refer to Figure 4-1 in the textbook. Describe how laws are created from constitutions, statutes, administrative agencies, and decisions of courts.
3. Why is it important to know the state legislators who represent your state? Name the state legislators for your state. How do you contact your legislators, and why is it necessary to contact the legislators regarding nursing issues?
4. State your position on having malpractice insurance as a registered nurse. Is it your responsibility or the responsibility of your employer? Under what circumstances could you use the malpractice insurance? Refer to the Application Activity: Nurse Practice Act on the Companion Website.
5. What are the procedures that occur when a nursing license is revoked in the state that you will practice?
6. Go to the NCSBN website and list the states that have passed the NLC legislation. Refer to Box 4-1 in the textbook for additional information.

6. Which of the following is an example of nonmaleficence and unintentional harm?
 1. Not locking a wheelchair and transferring a client into the wheelchair
 2. Catching a client who is falling and bruising the client's arm
 3. A client's allergic reaction to a prescribed medication
 4. Administering oxygen at 6 L/min to a client when the order is for 2 L/min
7. Identify behaviors that would be classified as an invasion of privacy for a client. (Select all that apply.)
 1. A nurse who removes articles from a bedside table in order to "clear out some of that junk."
 2. A middle-aged, mentally alert client who requests a nursing assistant to "get rid of a bedpan, used ketchup container, and other unused items."
 3. A nursing student who documents the client's name and address on paperwork to hand in to the clinical faculty member.
 4. A cousin who wants to review the chart for lab results and the physician's orders.
8. What is the correct response (actions) by the nurse if a physician asks a nurse to perform a task and the nurse has a lack of education or experience in performing that task?
 1. Inform the physician about the lack of education and experience, and then perform the task.
 2. Do not inform the physician and carry out the task.
 3. Inform the physician regarding the lack of education and/or experience necessary to safely perform the task. Refuse to do the task.
 4. Inform the physician, and then both parties can attempt to figure it out.
9. What is the best example of documentation by the nurse in the client's record?
 1. All facts and information regarding a person's condition, treatment, care, progress, any refusal or consent of treatment, and response to illness and treatment are noted.
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 3. All facts and information regarding a person's condition, treatment, care, progress, any refusal or consent of treatment, physician's competence, and response to illness and treatment are noted.
 4. Chart as little as possible and the nurse will have no reason to fear lawsuits.
10. Organ donation prohibits the: (Select all that apply.)
 1. donation of clients with brain death.
 2. sale of body organs.
 3. marketing of body organs.
 4. donation of cartilage and bones.

3. A client was discharged after having a 1-day surgery on her gallbladder. The nurse discharging the client failed to give her oral or written discharge instructions. This failure to carry out the provision of discharge instructions could result in charges of:
 1. malpractice.
 2. negligence.
 3. assault.
 4. battery.
4. For the nurse, which of the following statements indicates that the client understands informed consent of a surgical procedure?
 1. The nurse discovers the signed informed consent form on the bedside table before the surgeon discusses the procedure with the client.
 2. The client's oldest son stated that he explained the procedure to the client and the client told him that he wanted the surgery.
 3. The client states that the surgeon explained the procedure to him, allowed him to ask questions, and explained the risks of not permitting the surgery.
 4. The client is obviously operating at a 10-year-old mental capability but has never been declared legally incompetent.
5. A nurse is caring for an 89-year-old client who has severe chronic obstructive pulmonary disease and was transferred from a long-term care facility. While reviewing the transfer papers, she notes that the client has both a living will and a durable power of attorney. A living will differs from a durable power of attorney in that a living will:
 1. describes how the client wants his wishes carried out in the event of a terminal illness.
 2. is an example of an advance medical directive.
 3. determines which relative gets the house.
 4. allows a designated person to make decisions if the client is unable to make decisions.
6. A nurse threatens to give a loud, disruptive client an injection that will "knock him or her out." The nurse follows through on the threat and gives the injection without the client's consent. In which of the following orders did the nurse have liability?
 1. Battery, assault
 2. Battery, invasion of privacy
 3. Assault, invasion of privacy
 4. Assault, battery
7. A nurse documents in the client's chart that the physician is incompetent because he did not respond promptly to the nurse's call regarding the client. This is an example of _____ and _____.
 1. defamation
 2. slander
 3. libel
 4. battery
 5. unprofessional conduct

10. Within recent years, what statements regarding ethics have been made broader in scope or added to the "Code of Nurses"? Refer to Box 5-4 and Box 5-5 in the textbook.
11. What is the goal of ethical reasoning within the context of nursing?
12. As a nurse, what are three functions of the advocacy role?
13. _____ means "doing good."
14. _____ is often referred to as fairness.
15. _____ refers to telling the truth.
16. _____ means "answerable to oneself and others for one's own actions," while _____ refers to "the specific accountability or liability associated with the performance of duties of a particular role."

FOCUSED STUDY TIPS

1. What are your values regarding life, death, health, and illness?
2. Practice assisting someone (a friend, parent, significant other, etc.) in clarifying their values and identifying behaviors that may need further clarification by using the seven steps listed in Table 5-3 of the textbook.
3. What are some factors that have led to increased ethical concerns? Why do ethical concerns even exist?
4. List 6 of the 12 rights of the Bill of Rights for clients receiving health care. As a nurse, what are your responsibilities in promoting the Bill of Rights?
5. What common ethical issues currently face health care professionals? How do some hospitals resolve ethical issues?
6. Define harm. What is nonmaleficence? Give one example of unintentional harm and one example of intentional harm.
7. When caring for a client with acquired immune deficiency syndrome (AIDS), what is the moral obligation of the nurse according to the ANA position statement?
8. Explore your values on assisted abortion. What is your perception of the "morning after" pill? How do you plan on handling these issues in the workplace? What are your options if you choose not to participate in such actions?

CASE STUDIES

1. You are the nurse caring for a 45-year-old client who is in the end stages of acquired immune deficiency syndrome (AIDS). She is married and has two children, ages 14 and 17. The client is unable to perform the care needed by her children and spouse and she had to take a leave of absence from employment 8 months ago due to her advanced AIDS. Her family is experiencing emotional turmoil and financial stress due to her prognosis and inability to fully function in her roles as a contributor to income, a mother, and a wife. The client requests your assistance in deciding what actions should be taken to prolong her life. Her family and friends want her to do everything in her power to survive; however, she tells you that she is "so tired."
 - a. What considerations should you take into account in assisting the client to make those decisions?
 - b. In what way could you assist the client in reaching decisions about further health care?
 - c. Would an ethics committee be involved in this matter?
 - d. What principles of autonomy are applied to this situation?

CHAPTER 5

VALUES, ETHICS, AND ADVOCACY

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|------------------------------|---|
| 1. _____ Accountability | a. Mental positions or feelings |
| 2. _____ Active euthanasia | b. Fairness |
| 3. _____ Advocate | c. Telling the truth |
| 4. _____ Assisted suicide | d. Answerable to oneself and others for one's own actions |
| 5. _____ Attitudes | e. Do no harm |
| 6. _____ Autonomy | f. One who expresses and defends the cause of another |
| 7. _____ Beliefs | g. Actions that bring about the client's death directly |
| 8. _____ Beneficence | h. Ethical problems that occur in nursing practice |
| 9. _____ Bioethics | i. Withdrawing or withholding life-sustaining therapy |
| 10. _____ Code of ethics | j. A formal statement of a group's ideals and values |
| 11. _____ Fidelity | k. To be faithful to agreements and promises |
| 12. _____ Justice | l. Internalizing values from society and individual subgroups |
| 13. _____ Moral development | m. Giving clients the means to kill themselves if they request it |
| 14. _____ Moral distress | n. Doing good |
| 15. _____ Moral rules | o. Interpretations or conclusions that people accept as true |
| 16. _____ Nonmaleficence | p. Ethics as applied to human life or health |
| 17. _____ Nursing ethics | q. Process of learning to tell the difference between right and wrong and of learning what ought and ought not to be done |
| 18. _____ Passive euthanasia | r. Specific prescriptions for actions |
| 19. _____ Personal values | s. The right to make one's own decisions |
| 20. _____ Veracity | t. Conflict between the client's best interest and the nurse's personal belief system |

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 - d. Law:
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 - f. Public law:
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5. What are the procedures that occur when a nursing license is revoked in the state that you will practice?
6. Go to the NCSBN website and list the states that have passed the NLC legislation. Refer to Box 4–1 in the textbook for additional information.

- k. Range of models for integrating health care services for individuals or groups
- l. An interdisciplinary plan or tool that specifies interdisciplinary assessments, interventions, treatments, outcome for health-related conditions across a time line
- m. A group health care agency that provides health maintenance and treatment services to voluntary enrollees
- n. Government funded benefits available to persons with disabilities
- o. The totality of services offered by all health disciplines
- p. System in which the best use of nursing personnel is based on their educational preparation and skill sets
- q. Health care plan that contracts with individual health care providers

KEY TOPIC REVIEW

1. What are the three types of health care services?
 - a.
 - b.
 - c.
2. What is the purpose of primary prevention health care systems?
 - a. Health promotion and illness prevention
 - b. Rehabilitation, health restoration, and palliative care
 - c. Diagnosis and treatment
 - d. To promote the World Health Organization
3. What is the purpose of secondary prevention?
 - a. Health promotion and illness prevention
 - b. Rehabilitation, health restoration, and palliative care
 - c. Diagnosis and treatment
 - d. To promote the World Health Organization
4. What is the purpose of tertiary prevention?
 - a. Health promotion and illness prevention
 - b. Rehabilitation, health restoration, and palliative care
 - c. Diagnosis and treatment
 - d. To promote the World Health Organization
5. What are the primary goals of *Healthy People 2020*?
 - a.
 - b.
 - c.
 - d.

6. What is an example of a secondary prevention?
 - a. Physicians' offices
 - b. Weight control programs
 - c. Blood pressure clinics
 - d. Rehabilitation hospitals
7. _____ is the official agency at the federal level for public health.
8. What is the function of occupational health clinics? Give some examples of the types of roles that a nurse might perform in that environment.
9. Name four factors affecting health care delivery in today's health care environment.
 - a.
 - b.
 - c.
 - d.
10. According to the U.S. Census, the expected number of frail elderly (people over age 85) will be the _____ growing population segment in the United States and will number over _____ million by 2020 and _____ million by 2030.
11. What impact does the Health Insurance Portability and Accountability Act of 1996 (HIPAA) have on the health care system?
12. What is the definition of critical pathways, and how are critical pathways used in case management and managed care?

FOCUSED STUDY TIPS

1. Discuss the World Health Organization (WHO) project and *Healthy People 2020*.
2. What role does the federal government have in providing care to veterans and merchant mariners?
3. Define the roles of the following providers of health care:
 - a. Registered nurse
 - b. Licensed vocational nurse or licensed practical nurse
 - c. Advanced practice nurse
 - d. Complementary care provider
 - e. Case manager
 - f. Dentist
 - g. Dietitian
 - h. Occupational therapist
 - i. Paramedical technologist
 - j. Pharmacist
 - k. Physical therapist
 - l. Physician

- m. Physician assistant
 - n. Podiatrist
 - o. Respiratory therapist
 - p. Social worker
 - q. Spiritual support personnel
 - r. Unlicensed assistive personnel
4. Discuss in depth the uneven distribution of health services in the United States. What are the two facets of this problem?

CASE STUDIES

1. You are taking the health and physical assessment for an 80-year-old blind client who has just been admitted to the unit.
 - a. What type of health care coverage could she have at this point?
 - b. If the client's income is below the poverty level, what type of coverage could also be included in the health care coverage plan?
2. After caring for the client for 3 days, she is getting ready for discharge. The physician has written an order for physical therapy after discharge. In addition, he requests that a dietitian follow up with additional education regarding the client's newly diagnosed type II diabetes.
 - a. What roles do the two providers fulfill?
 - b. Where could the client receive the services, and what type of coverage could possibly pay for these services?
3. Refer to the "Research Note" in the textbook to answer the following questions regarding the types of nurses and delivery models in hospitals and how those factors influence patient outcomes.
 - a. How was the quality of care measured?
 - b. What types of models were used? Define each of those models.
 - c. How were quality, coordination, and communication in the units affected?
 - d. Why is this research important in today's health care delivery systems?

REVIEW QUESTIONS

1. Choose two frameworks for care that are used for the delivery of nursing care that supports continuity of care and cost-effectiveness:
 1. Managed care
 2. Nonfunctional method
 3. Secondary nursing
 4. Team nursing
2. Medicare is divided into two divisions, Part A and Part B. Another plan was added in January 2006. Part A is the:
 1. voluntary prescription drug plan that began in January 2006.
 2. voluntary plan that provides partial coverage of outpatient and physician services to those who are eligible.

3. plan section providing insurance toward hospitalization, home care, and hospice care.
4. plan section providing very limited financial coverage to low-income persons.
3. Medicare is divided into two divisions, Part A and Part B. Another plan was added in January 2006. Part B is the:
 1. voluntary prescription drug plan that began in January 2006.
 2. voluntary plan that provides partial coverage of outpatient and physician services to those who are eligible.
 3. plan section providing insurance toward hospitalization, home care, and hospice care.
 4. plan section providing very limited financial coverage to low-income persons.
4. Medicare is divided into two divisions, Part A and Part B. Another plan was added in January 2006. Part D is the:
 1. voluntary prescription drug plan that began in January 2006.
 2. voluntary plan that provides partial coverage of outpatient and physician services to people eligible.
 3. plan section providing insurance toward hospitalization, home care, and hospice care.
 4. plan section providing very limited financial coverage to low-income persons.
5. Medicaid is described as:
 1. a voluntary prescription drug plan that began in January 2006.
 2. a voluntary plan that provides partial coverage of outpatient and physician services to those who are eligible.
 3. a plan providing insurance toward hospitalization, home care, and hospice care.
 4. a plan providing very limited financial coverage to low-income persons.
6. Choose the person(s) eligible for Supplemental Security Income.
 1. Blind
 2. Persons not eligible for Social Security
 3. Children from low-income families that are covered under Medicaid
 4. Anyone over age 65
 5. Has recognized disabilities
7. What is the name of the classification system that prospective payment systems utilize?
 1. Medicare
 2. Medicaid
 3. State Children's Health Insurance Program (SCHIP)
 4. Diagnosis-related groups (DRGs)
8. Third-party reimbursement refers to the insurance company that pays the client's (first party) bill to the provider (second party). This component is part of the:
 1. private health insurance plan.
 2. diagnosis-related group (DRG).
 3. group health insurance plan.
 4. preferred provider organization.

9. Prepaid group plans for insurance include:
 1. Medicare and Medicaid
 2. Blue Cross and Blue Shield
 3. HMOs, PPOs, PPAs, IPAs, and PHOs
 4. Social Security and Supplemental Security Income
10. What is an example of health promotion?
 1. Immunizing children against chickenpox
 2. Caring for a dying client
 3. Assisting a stroke victim to highest rehabilitation possible
 4. Secondary prevention

CHAPTER 7

COMMUNITY NURSING AND CARE CONTINUITY

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--------------------------------------|--|
| 1. _____ Collaboration | a. Provides health-related services in places where people spend their time |
| 2. _____ Community | b. Provide primary care to specific populations and staffed by nurse practitioners and community health nurses |
| 3. _____ Community-based health care | c. Composed of people who share some common characteristics but who do not necessarily interact with each other |
| 4. _____ Community-based nursing | d. Provision of integrated, accessible health care services by clinicians who are accountable for addressing a majority of personal health care services |
| 5. _____ Community health nursing | e. Emphasizes the care of individuals in geographically local settings |
| 6. _____ Community nursing centers | f. Emphasizes the promotion and preservation of the health of groups |
| 7. _____ Continuity of care | g. A collegial working relationship with another health care provider in the provision of patient care |
| 8. _____ Discharge planning | h. Health care based on practical, scientifically sound and socially acceptable methods and technology made accessible to individuals and families |
| 9. _____ Population | i. A collection of people who share some attribute of their lives |
| 10. _____ Primary care | j. Process of preparing a client to leave one level of care for another |
| 11. _____ Primary health care | k. Coordination of health care services by health care providers for clients moving from one health care setting to another. |

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KEY TOPIC REVIEW

1. What are three of the factors motivating change in the health care system?
 - a. Escalating health care costs
 - b. Decreasing technology
 - c. Definite patterns of demographics
 - d. Shorter hospital stays
 - e. Decreased patient acuity
 - f. Limited access to health care
2. List four characteristics of primary care.
 - a.
 - b.
 - c.
 - d.
3. List four characteristics of primary health care.
 - a.
 - b.
 - c.
 - d.
4. Define community-based health care (CBHC). Where is the care directed, and what is involved in CBHC?
5. A _____ is a collection of people who share some attribute of their lives and interact with each other in some way. It is also defined as a social system in which the members interact formally or informally and form networks that operate for the benefit of all people in the community.
6. A _____ is composed of people who share some common characteristic but who do not necessarily interact with each other.
7. List six types of community-based frameworks and give the definition of each.
 - a. Type:
Definition:
 - b. Type:
Definition:
 - c. Type:
Definition:
 - d. Type:
Definition:
 - e. Type:
Definition:
 - f. Type:
Definition:

8. Easy access is needed for an effective community-based health care system.
 - a. True
 - b. False
9. Choose the community-based settings for nursing practice.
 - a. Community nursing centers
 - b. Long-term care facilities
 - c. Parish nursing
 - d. Telehealth
 - e. Hospitals
10. Community-based nursing focuses on care of individuals in geographically local settings, whereas community health nursing emphasizes the promotion and preservation of the health of groups.
 - a. True
 - b. False

FOCUSED STUDY TIPS

1. What do the Pew Commission competencies for future practitioners include? What are the competencies (listed in the textbook) that the health care practitioner would require?
2. How does the future practitioner obtain these competencies?
3. Primary health care involves five principles. List and explain the five principles in detail.
4. Identify the essential aspects of home health nursing. What makes this community-based role especially challenging?
5. How does the community health care setting differ from traditional settings?

CASE STUDY

A nurse has been working as the case manager in a pediatric unit and decides that she wants to be involved in community nursing.

1. What are some types of community nursing that could be considered?
2. What skills would be needed for the community nursing that might not be used in the pediatric ward?

REVIEW QUESTIONS

1. The competencies necessary for collaboration between health care providers include:
 1. mutual respect, trust, and negotiation.
 2. communication skills, trust, and decision making.
 3. negotiation, conflict management, and mutual respect.
 4. conflict management, trust, and decision making.

2. As a nurse collaborator, the nurse will perform these actions:
 1. Share personal expertise with other nurses and elicit the expertise of others to ensure quality client care.
 2. Seek opportunities to collaborate with and within professional organizations.
 3. Offer expert opinions on legislative initiatives related to health care.
 4. Collaborate with other health care providers and consumers on health care legislation to best serve the needs of the public.
3. Which roles, besides educator, does the nurse need to have in community-based nursing in order to meet the challenges?
 1. Manager, collaborator, advocate, and clinician
 2. Advocate, clinician, decision maker, and empowerment
 3. Advocate to heighten degree of awareness of being a rural nurse, advocate, and enforcer
 4. Enforcer of health policies, clinician, and team nurse
4. When does discharge planning begin for a client?
 1. Prior to discharge
 2. At admission
 3. Two days after admission
 4. Two hours before discharge
5. While doing a home health appraisal, the home health nurse notes the following conditions. Which are potential hazards? (Select all that apply.)
 1. Adequate lighting in the rooms, hallways, stairways, and night-lights in the hallways
 2. Stairs without handrails
 3. Grab bars near toilet and tub
 4. Unsecured throw rugs
 5. No fire alarm or extinguisher
 6. Running water and electricity
6. Which of the following populations would possibly be identified before discharge as needing a referral to a long-term nursing facility?
 1. An elderly client who has no caregivers to provide the necessary oversight of care
 2. A child who has had an uncomplicated removal of the tonsils
 3. A mother who delivered a 7-pound baby vaginally the previous day
 4. A client who has a well-healed surgical wound to the abdomen
7. What is the major responsibility of community nursing?
 1. Primary health care in the event of an emergency
 2. Health promotion and disease prevention
 3. Being dependent in their practice
 4. Practices in an institutional setting

8. Choose the correct responses that identify a healthy community.
 1. The members are aware that they belong to and participate in a community.
 2. There are closed channels of communication that do not allow information to flow among the citizens.
 3. Legitimate and effective ways to settle disputes that arise within the community exist.
 4. A decreased level of wellness is promoted among some of its members.
9. One community-based program is parish nursing; identify one of the following roles that the parish nurse may perform.
 1. Establish an abuse program.
 2. Serve as an outreach coordinator.
 3. Serve as faith healer.
 4. Serve as a personal health counselor.
10. One group that benefits from having advanced practice nurses within the community is:
 1. institutionalized persons.
 2. school-age children.
 3. homeless persons.
 4. socially adept individuals.

CHAPTER 8

HOME CARE

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--|---|
| 1. _____ Caregiver role strain | a. Health services provided in the home setting |
| 2. _____ Durable medical equipment (DME) company | b. Nursing services and products provided to clients in their homes |
| 3. _____ Home care | c. Support and care of the dying person and family |
| 4. _____ Home health care nursing | d. Provides health care equipment for the client at home |
| 5. _____ Hospice nursing | e. When the physical, emotional, social, and financial burdens jeopardize their own health and well-being |
| 6. _____ Registry | f. Contracts with individual care providers to care for the client in the home |

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KEY TOPIC REVIEW

1. Identify factors that have contributed to the increase and growth in home health care.
2. What does home care involve in today's health care system?
3. _____ nursing is support and care of the dying person and his or her family and is considered a subspecialty of home health nursing.
4. What are the advantages of home health nursing?
5. What are the disadvantages of home health nursing?
6. List four duties that a home health nurse might perform in the home setting.
 - a.
 - b.

10. Electronic medical records (EMRs) or computer-based records (CPRs) permit electronic client data retrieval by caregivers, administrators, creditors, and other persons who require the data. Who sets the national standards to protect the identity of the clients?
 1. The federal government sets the standards.
 2. There are no national standards.
 3. The different states set the standards.
 4. HIPAA sets the standards.

2. The home health nurse is functioning as an educator during a home health visit. Which of the following is the best example of that role?
 1. Changing an indwelling Foley catheter
 2. Discussing living wills and durable power of attorney and obtaining a social work consult
 3. Instructing a client on a diabetic diet
 4. Documentation of care provided by the agency
3. The home health nurse is functioning as an advocate during an initial assessment. Which of the following is the best example of that role?
 1. Changing an indwelling Foley catheter
 2. Discussing living wills and durable power of attorney
 3. Instructing a client on a diabetic diet
 4. Documentation of care provided by the agency
4. The home health nurse is functioning as a caregiver (provider of direct care) during a home health visit. Which of the following is the best example of that role?
 1. Changing an indwelling Foley catheter
 2. Discussing living wills and durable power of attorney
 3. Instructing a client on a diabetic diet
 4. Documentation of care provided by the agency
5. What is considered to be the crux of home health care?
 1. Being an advocate
 2. Being a caregiver
 3. Being a case manager
 4. Being an educator
6. In home health nursing, family members are considered as _____ clients because they are associated with caregiving and have a major impact on the client's wellness status.
 1. primary
 2. secondary
 3. tertiary
 4. isolated
7. Identify the signs of caregiver role strain. (Select all that apply.)
 1. Complains of decreasing energy and not enough time to perform tasks
 2. Has anxiety about ability to meet future needs
 3. Has feelings of joy and happiness
 4. Has difficulty performing routine tasks for the client
8. An example of a home health service provided by nurses is:
 1. housekeeping duties for the client.
 2. providing a hospital bed for the client.

3. What are the advantages of taking the National Council Licensure Examination (NCLEX®) on a computer? When did the test change from pen-and-paper administration to computer administration?
4. Telemedicine (or telehealth) uses technology to transmit electronic data about clients to persons at distant locations. What are some of the advantages of telemedicine? What are the disadvantages?
5. One of the main concerns with health care and information technology is privacy issues. As a nurse, how can you impact changes on the state and federal level regarding privacy? Refer to the ANA position statement on privacy. What is the nurse's role in the privacy issue?

CASE STUDY

A 45-year-old client is scheduled to have a hysterectomy later this week. She is at the hospital to get her preoperative nursing assessment, several laboratory exams, and chest x-ray. The nurse and laboratory technologist are using a computerized data entry system that is managed on a handheld device.

1. If the client's results are entered into computer-based patient records (CPRs), who would be able to legally access her medical information?
2. The chest x-ray is abnormal and the primary care provider wishes to consult a respiratory specialist. If he sends the x-ray film electronically to the consulting primary care provider, that is an example of what type of medicine?
3. What are the advantages of this type of consultation?
4. Does the client have to sign any consent forms in regard to her electronic medical records?

REVIEW QUESTIONS

1. What is an advantage of having "paper" medical records for clients?
 1. There are legal standards that have been tested for the paper medical record and there are years of cost analysis for the financial aspects of having paper medical records.
 2. The paper medical records are often illegible and incomplete.
 3. Paper medical records take up a lot of storage space due to the required time to keep the records on file.
 4. Records are shared only through hard copy and thus are difficult to locate and provide copies to the various agencies requiring records for review.
2. The World Wide Web (WWW) refers to:
 1. wrestling team.
 2. complex links among Web pages or websites.
 3. universal resource locators.
 4. a network designed to facilitate the organization and application of data.
3. Universal resource locators (URLs) are also called:
 1. television stations.
 2. addresses.
 3. links among Web pages or websites.
 4. rural addresses.

CHAPTER 9

ELECTRONIC HEALTH RECORDS AND INFORMATION TECHNOLOGY

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--|---|
| 1. _____ Clinical decision support systems | a. The science of using computer information systems in the practice of nursing |
| 2. _____ Computer-based patient records | b. Expert who combines computer, information, and nursing science |
| 3. _____ Data warehousing | c. Uses technology to transmit electronic data |
| 4. _____ Distance learning | d. Electronic forms that incorporate evidence from literature into particular client situations that guide care planning |
| 5. _____ Electronic medical records (EMRs) | e. An MIS that focuses on the types of data needed to manage client care activities |
| 6. _____ Hospital information system (HIS) | f. EMR |
| 7. _____ Management information system (MIS) | g. Use of computers to solve problems |
| 8. _____ Nurse informaticist | h. Facilitates organization and application of data to manage an organization or department |
| 9. _____ Nursing informatics | i. Educational opportunities delivered under situations in which the teacher and learner are not in the same place at the same time |
| 10. _____ Technology | j. Accumulation of large amounts of data that are stored over time |
| 11. _____ Telemedicine | k. Permit electronic client data entry and retrieval by caregivers |

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3. _____ nursing is support and care of the dying person and his or her family and is considered a subspecialty of home health nursing.
4. What are the advantages of home health nursing?
5. What are the disadvantages of home health nursing?
6. List four duties that a home health nurse might perform in the home setting.
 - a.
 - b.

KEY TOPIC REVIEW

1. Critical thinking consists of high-level cognitive processes that include _____ and _____.
2. Define the following problem-solving methods:
 - a. Trial and error
 - b. Intuition
 - c. Nursing process
 - d. Scientific method
 - e. Modified scientific method
3. _____ is a purposeful mental activity that guides beliefs and actions.
4. What is meant by inductive and deductive reasoning in critical thinking?
5. _____ is a technique one can use to look beneath the surface, recognize and examine assumptions, search for inconsistencies, examine multiple points of view, and differentiate what one knows from what one merely believes.
6. List five or more characteristics that most critical thinkers have.
7. _____, at every step of critical thinking and nursing care, helps examine the ways in which the nurse gathers and analyzes data, makes decisions, and determines the effectiveness of interventions.
8. Identify the sequential steps to the decision-making process.
 - a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
 - h.
9. What is the definition of decision making? Give one example of the decision-making process as a critical-thinking process for choosing the best actions to meet a desired goal.
10. Critical thinkers are willing to admit what they do not know; they are willing to seek new information and to rethink their conclusions in light of new knowledge.
 - a. True
 - b. False

FOCUSED STUDY TIPS

1. What are the four stages of critical thinking?
2. Describe Maslow's hierarchy of basic human needs. Why is this concept important to nursing?
3. List the characteristics of critical thinking. What are the skills needed by one who uses critical thinking?
4. List and describe the three methods used with critical thinking that is used to problem-solve during the nursing process.

5. Why must the nursing process occur in chronological order of assessment, analyzing, planning, implementing, and evaluating?

CASE STUDY

The student nurse should begin using critical thinking in daily life. By doing this, the student nurse will practice using critical thinking in the clinical environment and in everyday situations. In order to clarify the critical-thinking process for a beginning nursing student, a non-nursing case study will be used for this case study.

A close friend states that she is habitually overdrawing her bank checking account. She has asked you for advice with this problem. Using the Socratic questions listed in Box 10-2 of the textbook, analyze this problem.

- a. Questions about the question or problem:
- b. Questions about assumptions:
- c. Questions about point of view:
- d. Questions about evidence and reasons:
- e. Questions about implications and consequences:

REVIEW QUESTIONS

1. In critical thinking, the least effective decision-making process is:
 1. analyzing the data.
 2. formulating conclusions.
 3. establishing assumptions.
 4. synthesizing information.
2. When discussing the trial-and-error method of problem solving, it is understood that this method lacks:
 1. emphasis.
 2. order.
 3. efficiency of time.
 4. precision.
3. The scientific method of problem solving is:
 1. most effective in controlled situations.
 2. least effective in controlled situations.
 3. illogical.
 4. lacking in precision.
4. The modified scientific method is used in nursing because it: (Select all that apply.)
 1. does not involve the interaction between the client and nurse as they work together.
 2. does involve the interaction between the client and nurse as they work together.
 3. is used to identify potential or actual health care needs, set goals, devise a plan to meet the client's needs, and evaluate the plan's effectiveness.
 4. deals with stressful environments.

5. During emergency situations, critical thinking enables nurses to:
 1. delay response.
 2. underreact to the problem.
 3. meet the physician's needs.
 4. recognize important cues.
6. In the pediatric unit, a nurse tries to have a young child use the incentive spirometer. The child is refusing to use the equipment and the nurse encourages the child to inhale slowly and steadily to maintain constant flow through the unit, then hold her breath for 2–3 seconds, and then exhale slowly. If the child cannot grasp the mechanics behind using the incentive spirometer, the nurse could give the client balloons and/or a jar of bubbles to blow. This is an example of:
 1. modified scientific method.
 2. scientific method.
 3. creativity.
 4. critical thinking.
7. While working in the critical care unit, a nurse is caring for a client after cardiac bypass. The nurse gets a gut feeling “that something is wrong” even though the client has no outward signs or symptoms. This is an example of:
 1. intuition.
 2. trial and error.
 3. research process.
 4. scientific method.
8. In the emergency department, the nurse observes that a client is actively bleeding from an abdominal gunshot wound. The nurse assumes that the client is at an increased risk for hypovolemic shock. The nurse bases her viewpoint after viewing the outpouring of frank, red bleeding and reasoning that shock may occur if fluids or blood is not replaced. This is an example of:
 1. creativity.
 2. deductive reasoning.
 3. inductive reasoning.
 4. critical analysis.
9. While attending a nursing educator's conference, a nursing instructor obtains information about the use of concept maps and clinical pathways. The nursing instructor returns to work at the university and discusses the new techniques with the other instructors. This is an example of:
 1. creating an environment to support critical thinking.
 2. seeking information regarding new educational promotions.
 3. intellectual humility.
 4. judgment.
10. The definition of the nursing process is:
 1. essential to safe, competent, skillful nursing practice.
 2. thinking that results in the development of new ideas and products.
 3. a critical-thinking process for choosing the best actions to meet a desired goal.
 4. a systematic, rational method of planning and providing individualized nursing care.

CHAPTER 11

ASSESSING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|----------------------------------|--|
| 1. _____ Assessing | 19. _____ Symptoms |
| 2. _____ Cephalocaudal | 20. _____ Validation |
| 3. _____ Closed questions | a. Usually closed, and directs the client's answer |
| 4. _____ Cues | b. Highly structured, elicits specific information |
| 5. _____ Data | c. Planned communication |
| 6. _____ Database | d. An understanding between two or more people |
| 7. _____ Directive interview | e. Systematic and continuous collection, organization, validation, and documentation of data |
| 8. _____ Inferences | f. Generally require only a yes or no answer |
| 9. _____ Interview | g. Double checking data, ensuring that objective and related subjective data agree |
| 10. _____ Leading question | h. Symptoms |
| 11. _____ Neutral question | i. One a client can answer without direction or pressure, is open-ended |
| 12. _____ Nondirective interview | j. Subjective data |
| 13. _____ Objective data | k. Objective data |
| 14. _____ Rapport | l. Head to toe |
| 15. _____ Review of systems | m. Subjective or objective data that can be observed by the nurse |
| 16. _____ Screening examination | n. Brief review or systems |
| 17. _____ Signs | o. All information about a client |
| 18. _____ Subjective data | p. Information |
| | q. Brief screening examination |

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- r. Rapport-building interview
- s. Nurse's interpretation or conclusions based on cues
- t. Detectable by an observer, can be measured or tested

KEY TOPIC REVIEW

1. What is the purpose of the nursing process?
2. The nursing process is both interpersonal and collaborative between the nurse and the client.
 - a. True
 - b. False
3. Assessing is a continuous process carried out through all the phases of nursing.
 - a. True
 - b. False
4. What are the four different types of assessment?
 - a.
 - b.
 - c.
 - d.
5. According to the Joint Commission on Accreditation of Healthcare Organizations (JACHO), each client must have an initial assessment within _____ hours of admission.
6. What are the four activities involved in the nursing process?
 - a.
 - b.
 - c.
 - d.
7. Determine if the following information is subjective or objective assessment data.

(S) Subjective (O) Objective

 - a. _____ "I feel tired all the time."
 - b. _____ Skin warm and dry to touch
 - c. _____ "I am itching all over."
 - d. _____ Smell of ammonia in urine
 - e. _____ Purplish discoloration on left forearm
 - f. _____ Temperature of 102 degrees orally
8. Distinguish between the primary and secondary (indirect) sources of data in the assessment process.

(P) Primary (S) Secondary

 - a. _____ "My son has vomited for 3 days."
 - b. _____ "I have been coughing for 2 weeks."
 - c. _____ 45-year-old female
 - d. _____ "I have a rash."

9. When does the observation portion of data collection occur?
 - a. On the initial assessment
 - b. Immediately
 - c. It is an ongoing process.
 - d. Observation is not part of data collection.
10. _____ is planned communication or conversation with a purpose.

FOCUSED STUDY TIPS

1. Explain the difference between the medical model of problem solving and the nursing process. What are the parallels between the two models?
2. Why would it be important to review data from client records such as occupation, religion, marital status, and so on before beginning the nurse health history?
3. Why is sharing of information important in health care? What is pertinent information that needs to be relayed between nursing shifts?

CASE STUDY

A client is being transferred to the unit from the recovery room after having an abdominal tumor removed. The recovery room nurse gives an oral report on the client's condition stating that the dressing is dry and intact, vital signs stable, IV of RL infusing at 100 mL per hour in the left forearm, intact and patent, medications given, and that the client has no complaints of pain. During the initial assessment, the medical-surgical nurse notes that the abdominal dressing has bright red drainage. The client stated, "I am really hurting bad!" The vital signs are 140/86, RR 24, T 98.2 orally, and pulse of 90 beats per minute.

1. What are the objective data?
2. What are the subjective data?
3. Who is considered the primary source?
4. Who is considered the secondary source?

REVIEW QUESTIONS

1. The nurse is assessing the sputum characteristics of a client with pneumonia. What are the senses that the nurse may use in the assessment of the sputum? (Select all that apply.)
 1. Vision
 2. Smell
 3. Hearing
 4. Touch
2. What are two coping mechanisms that clients may exhibit during hospitalization?
 1. Micromanaging and/or anger
 2. Macromanaging and/or anger
 3. Misery and/or aggression
 4. Anger and/or mismanagement

3. During the process of data collection, the nurse must be cognizant of the different cultural aspects in health care. In the interview phase, what should the nurse consider that might have a cultural aspect?
 1. Time of the interview
 2. Setting of the interview
 3. Distance between nurse and client
 4. Seating arrangement
4. What is an example of an open-ended question that the nurse may use in the interview process?
 1. "What medication did you take today?"
 2. "What surgeries have you had in the past?"
 3. "Are you a student at the local college?"
 4. "How have you been feeling lately?"
5. What is the name of the head-to-toe approach that usually begins the nurse physical examination?
 1. Review of systems
 2. Screening examination
 3. Cephalocaudal
 4. Caudal approach
6. What framework is based on 11 functional health patterns and collects data about dysfunctional and functional behavior?
 1. Orem's self-care model
 2. Gordon's functional health patterns
 3. Roy's adaptation model
 4. The wellness model
7. After completing the health history and the physical assessment, the nurse identifies discrepancies in the information. What is this process called?
 1. Assessing
 2. Diagnosing
 3. Planning
 4. Evaluating
8. A client presents to the emergency department with complaints of chest pain. The nurse takes the client's vital signs. The nurse is implementing which phase of the nursing process?
 1. Assessment
 2. Diagnosis
 3. Planning
 4. Implementation
9. The nurse reassesses a client's temperature 45 minutes after administering acetaminophen. This is an example of what type of an assessment?
 1. Ongoing
 2. Intermittent

3. Terminal
 4. Routine
10. The nurse is measuring the drainage from a Jackson Pratt drain. Which of the following should the nurse consider as objective data?
1. The client is complaining of abdominal pain.
 2. The drainage measurement is 25 mL.
 3. The client stated, "I did not empty the drain."
 4. The client stated that he has a pain level of 5.

CHAPTER 12

DIAGNOSING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|-------------------------------------|--|
| 1. _____ Defining characteristics | a. Relates to the client's preparedness for implementing behaviors to improve their health condition |
| 2. _____ Dependent functions | b. Generally accepted measure, rule, model or pattern |
| 3. _____ Diagnosis | c. The basic three-part diagnosis statement |
| 4. _____ Diagnostic labels | d. The cluster of signs and symptoms that indicate the presence of a particular diagnostic label |
| 5. _____ Etiology | e. Diagnosis that is associated with a cluster of other diagnoses |
| 6. _____ Health promotion diagnosis | f. Classification system |
| 7. _____ Independent functions | g. Added words to give additional meaning to a diagnostic statement |
| 8. _____ Norm | h. Causal relationship between a problem and its related or risk factors |
| 9. _____ Nursing diagnosis | i. Statement or conclusion regarding the nature of a phenomenon |
| 10. _____ PES format | j. Areas of health care that are unique to nursing |
| 11. _____ Qualifiers | k. Indicate that a problem is likely to develop without nursing intervention |
| 12. _____ Risk factors | l. Clinical judgment that a problem does not exist, but that a problem is likely to develop without nursing intervention |
| 13. _____ Risk nursing diagnosis | m. Generally accepted norm |
| 14. _____ Standard | n. Client's problem statement, plus etiology |
| 15. _____ Syndrome diagnosis | o. Standardized NANDA names for diagnoses |
| 16. _____ Taxonomy | p. Describes human responses to levels of wellness in an individual, family, or community |
| 17. _____ Wellness diagnosis | q. Physician prescribed therapies and treatments |

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KEY TOPIC REVIEW

1. What is the first stage of the nursing process?
2. What is the second stage of the nursing process?
3. A _____ is a classification system or set of categories based on a single principle or set of principles.
4. What are the parts of the North American Nursing Diagnosis Association (NANDA) nursing diagnosis?
 - a. _____
 - b. _____
 - c. _____
5. All nurses are responsible for making nursing diagnoses according to the ANA Standards of Practice.
 - a. True
 - b. False
6. The nursing diagnosis is a judgment made only after thorough, systematic data collection.
 - a. True
 - b. False
7. What are the five types of nursing diagnoses?
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____
8. In order to enhance clinical usefulness, the diagnostic labels must be as _____ as possible.
9. What five words are identified as qualifiers to give additional meaning to the diagnostic statement?
 - a. _____
 - b. _____
 - c. _____
 - d. _____
 - e. _____
10. What is the definition of etiology? What are two characteristics of etiology?
11. For risk diagnoses, there are no subjective or objective signs in the assessment phase.
 - a. True
 - b. False
12. For actual nursing diagnoses, the defining characteristics are the client's signs and symptoms in the assessment phase of the nursing process.
 - a. True
 - b. False

FOCUSED STUDY TIPS

1. A nursing diagnosis has three components. List the three components and give an example of each.
2. Why is it important to differentiate among the possible causes in the nursing diagnosis? (Refer to Table 12-2 in textbook.)
3. What are the differentiating factors between a nursing diagnosis and a medical diagnosis?

4. Describe characteristics of the nursing diagnosis. What is a two-part diagnostic statement? What is a three-part diagnostic statement?
5. List two examples each of a one-part, two-part, and three-part diagnostic statement. Refer to the PES diagnosis in the textbook.

CASE STUDY

A newly admitted client in the unit will be your responsibility as the registered nurse. The client is a 47-year-old male of American Indian heritage with type 2 diabetes. He stated that he hasn't been taking his medication because it does not make him feel any better; he also has difficulty remembering to take the medication. The following information pertains to this client:

- Fingerstick blood sugar = 213 mg/dl
 - B/P 150/90; temp 98.6 oral; respirations 24 breaths per minute; and pulse 78 beats/min.
 - "I use the bathroom about 8 times per day."
 - Ht 6 feet 4 inches; weight 284 pounds
1. What is an actual nursing diagnosis for this client?
 2. What is a potential nursing diagnosis for this client?
 3. Identify one subjective and one objective assessment to substantiate the nursing diagnosis.
 4. What is the outcome goal for the patient?

REVIEW QUESTIONS

1. The end result of data collection and analysis is:
 1. carrying out the plan of care.
 2. collecting and then analyzing the data.
 3. identifying actual or potential health concerns.
 4. identifying the client's response to care.
2. Identify the nursing diagnosis from the following medical diagnoses.
 1. Fever of unknown origin
 2. Pancreatitis
 3. Potential for sleep-pattern disturbances
 4. Congestive heart failure
3. The purpose of a nursing diagnosis is to:
 1. define taxonomy of nursing language.
 2. promote taxonomy of nursing language.
 3. identify a client's problem plus etiology.
 4. establish a set of principles.

4. Choose the appropriate activities that the nurse may perform during the diagnosing component of the nursing process. (Select all that apply.)
 1. Compare data against current nursing standards.
 2. Obtain a nursing health history.
 3. Cluster or group the data to generate a tentative hypothesis.
 4. Review the client records and nursing literature.
 5. Identify gaps and inconsistencies in the data.
5. One of the nursing functions during the diagnosing phase of the nursing process is to:
 1. clarify all inconsistencies in the data before making inferences.
 2. identify Gordon's functional health patterns and compare with the client.
 3. review the literature and review professional journals and textbooks.
 4. document the health assessment in a specific form.
6. *Readiness for Enhanced Parenting* is an example of which type of diagnosis?
 1. Wellness diagnosis
 2. Health-seeking diagnosis
 3. Two-part diagnosis
 4. Three-part diagnosis
7. Which of the following nursing diagnostic statements is correct?
 1. Fluid replacement related to fever
 2. Impaired skin integrity related to immobility
 3. Impaired skin integrity related to ulceration of sacral area
 4. Pain related to severe headache
8. How does the nurse begin with a diagnostic label for a collaborative problem?
 1. Readiness for Enhanced Spiritual Well-Being
 2. Alteration of Respiratory Status
 3. Potential Complication for Pneumonia: Atelectasis
 4. Impaired Respiratory System
9. The PES format for writing a nursing diagnosis is used for which of the following?
 1. Actual nursing diagnoses
 2. Potential nursing diagnoses
 3. Risk for nursing diagnoses
 4. Wellness diagnoses
10. Choose the correct example of a qualifier.
 1. Syndrome
 2. Potential
 3. Deficient
 4. Risk for

11. Identify and select the advantages of using a taxonomy of nursing diagnoses. (Select all that apply.)
 1. A taxonomy of nursing diagnoses would promote a classification system or set of categories for a single or set of principles for professional nurses.
 2. A taxonomy of nursing diagnoses can be used by physicians to define diagnostic nursing terminology.
 3. A taxonomy of nursing diagnoses enhances the professional practice of the nurse in generating and completing a nursing care plan.
 4. A taxonomy of nursing diagnoses consists of nursing diagnoses for a single principle or set of principles that were developed by other nursing professionals.
12. Identify the components of a nursing diagnosis. (Select all that apply.)
 1. Related factors
 2. Risk factors
 3. Problem
 4. Definition
 5. Defining characteristics
 6. Medical conditions

CHAPTER 13

PLANNING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|---------------------------------------|---|
| 1. _____ Collaborative care plans | 15. _____ Nursing Interventions Classification (NIC) |
| 2. _____ Collaborative interventions | 16. _____ Nursing Outcomes Classification (NOC) |
| 3. _____ Concept map | 17. _____ Policies |
| 4. _____ Critical pathways | 18. _____ Priority setting |
| 5. _____ Dependent interventions | 19. _____ Procedures |
| 6. _____ Discharge planning | 20. _____ Protocols |
| 7. _____ Formal nursing care plan | 21. _____ Rationale |
| 8. _____ Goals/desired outcomes | 22. _____ Standardized care plan |
| 9. _____ Independent interventions | 23. _____ Standing order |
| 10. _____ Indicator | a. Activities that nurses are licensed to initiate on the basis of their knowledge and skills |
| 11. _____ Individualized care plan | b. Developed to govern the handling of frequently occurring situations |
| 12. _____ Informal nursing care plan | c. Actions that a nurse performs to achieve client goals |
| 13. _____ Multidisciplinary care plan | d. Process of establishing a preferential sequence for addressing nursing diagnoses and interventions |
| 14. _____ Nursing interventions | e. Actions the nurse carries out in conjunction with other health team members |
| | f. Collaborative care plan that sequences care that must be given |
| | g. Process of anticipating and planning for needs after discharge |
| | h. A taxonomy of nursing outcome statements |

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- i. Specific patient state that is most sensitive to nursing interventions, and measurable
- j. Similar to protocols, specify what is to be done
- k. Gives the nurse authority to carry out specific actions under certain circumstances
- l. Strategy for action that exists in the nurse's mind
- m. Tailored to meet unique needs of a specific client
- n. Outlines care required for clients with common, predictable conditions
- o. A critical pathway what sequences care required for client with common conditions
- p. Activities carried out under the orders or supervision of a licensed physician or other health care provider
- q. Actions commonly required for a particular group of clients
- r. Written or computerized guide that organizes information
- s. Description in observable client responses what the nurse hopes to achieve by implementing the nursing interventions
- t. Formal plan that specifies the nursing care for groups of clients with common needs
- u. Scientific principle given as the reason for selecting a particular nursing intervention
- v. Visual tool in which ideas or data are enclosed in circles or boxes connected by lines or arrows to indicate relationships
- w. A taxonomy of nursing interventions

KEY TOPIC REVIEW

1. According to Dochterman and Bulechek (2004), a _____ is "any treatment, based upon clinical judgment and knowledge that a nurse performs to enhance client outcomes."
2. When does planning begin?
3. Who is responsible for developing the initial comprehensive plan of care, and when is it initiated?
4. List the four purposes the nurse uses to guide daily planning by utilizing ongoing assessment data.
 - a. _____
 - b. _____
 - c. _____
 - d. _____
5. During the planning stage of the nursing process, what are four tasks that the nurse and client complete?
 - a. _____
 - b. _____
 - c. _____
 - d. _____
6. Match the four different types of nursing care plans with their correct definitions.

| | | |
|-------------------------------|-------|--|
| a. Informal nursing care plan | _____ | is tailored to meet the unique needs of a specific client—needs that are not addressed by the standardized plan. |
| b. Standardized care plan | _____ | is a strategy for action that exists in the nurse's mind. |
| c. Individualized care plan | _____ | is a written or computerized guide that organizes information about the client's care. |
| d. Formal nursing care plan | _____ | is a formal plan that specifies the nursing care for groups of clients with common needs. |

7. Refer to Figure 13–2 in the textbook. What documents may be included in a complete plan of care?
 - a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
8. Refer to the standards of care for thrombophlebitis in Figure 13–3 of the textbook. How are standards of care different than individualized care plans? What are the advantages and disadvantages of standards of care?
9. Why are students asked to complete pathophysiology flow sheets or concept maps or care plans with rationales? Define concept map and rationale.
10. What do the goals or desired outcomes describe? What is the Nursing Outcomes Classification (NOC)?

FOCUSED STUDY TIPS

1. What is planning? What phase of the nursing process is planning? What is the end product of planning called? Who is involved in the planning process?
2. Discuss the three types of planning and list the significant tasks that registered nurses must do during each of the types/stages of planning.
3. Differentiate between protocols, policies, procedures, and standing orders.
4. What are the 10 guidelines for writing nursing care plans? Why is each guideline important?
5. What is meant by the activity of priority setting in the planning process? What factors need to be considered when assigning priorities?
6. What is the purpose of desired goals and/or outcomes?

CASE STUDIES

1. A nurse is eating at a local fast-food restaurant. Suddenly, another customer starts choking and clutches her throat. The nurse attempts the Heimlich maneuver and it is unsuccessful. The client becomes unresponsive and is not breathing. The customer's tray is on the table and a partially eaten hot dog is on the tray.
 - a. What is the first action to take at this point?
 - b. If the client does not respond, what should the next action be?
 - c. What has the nurse done to assess the situation?
 - d. What parts of the nursing process are being carried out?

Outcomes should be SMART (specific, measurable, appropriate, realistic, and timely). Analyze the following nursing care plan:

2. A client has stage 4 pressure ulcers on the coccyx, left and right malleoli, and both heels. He is unable to turn himself in the bed. His daughter stated "This happened so suddenly; he did not have these sores until he had the stroke and quit eating." The nurse assesses the client and notes that he is an elderly, emaciated, bedfast client with the previously stated pressure ulcers.
 - a. What are the subjective and objective data?
 - b. What nursing diagnosis will fit this situation?
 - c. What are the realistic short-term and long-term goals for this client?
 - d. What are four nursing orders or interventions that can be used for this client?

REVIEW QUESTIONS

1. "Client will walk to end of hallway without assistance by Friday" is an example of a:
 1. long-term goal.
 2. short-term goal.
 3. nursing intervention.
 4. rationale.
2. "Client will ambulate 20 yards without assistance in 8 weeks" is an example of a:
 1. long-term goal.
 2. short-term goal.
 3. nursing intervention.
 4. rationale.
3. The nurse instructs a newly diagnosed diabetes client on an 1,800-calorie ADA diet. This is which type of nursing intervention?
 1. Independent intervention
 2. Dependent intervention
 3. Collaborative intervention
 4. Variable intervention
4. The nurse instructs the client on turning, coughing, and deep breathing q 2 hours. What is the relationship of nursing interventions to problem status?
 1. Health promotion interventions
 2. Treatment interventions
 3. Prevention interventions
 4. Observation interventions
5. The registered nurse needs to assign a person to insert a Foley catheter on a client. To whom can she delegate this task?
 1. Unlicensed personnel with limited training
 2. A licensed practical/vocational nurse

3. The physician
4. The client's daughter
6. Planning consists of which component?
 1. Reassess the client.
 2. Analyze data.
 3. Select nursing interventions.
 4. Determine the nurse's need for assistance.
7. Consider the following nursing diagnosis: "Altered nutritional status, less than body requirements related to inability to feed self." What is an example of a short-term goal for this client?
 1. The client will eat 75% of his meals by Friday (September 20) with the use of modified eating utensils to feed self with minimal assistance.
 2. The client will learn about nutritious meal planning as exhibited by choosing one correct menu.
 3. The client will acquire competence in managing cookware designed for handicapped clients.
 4. The client will learn preparation techniques that are quick and easy to manage.
8. The nurse admitted a client in active labor to the labor and delivery wing of the hospital. When does the planning for client care start?
 1. After the physician has delivered the baby
 2. After the admission process
 3. When the client is discharged to the postpartum unit
 4. During the initial meeting
9. Which of the following is part of the permanent client record?
 1. Nursing protocols
 2. Client care plan
 3. Procedures for client care
 4. The nurse's notebook of daily notes to herself
10. In caring for a client with stage 4 pressure ulcers on the coccyx, the nurse is to turn the client every 2 hours while in bed. What part of the nursing process is being carried out?
 1. Assessment
 2. Diagnosis
 3. Implementation
 4. Evaluation
11. The benefits of a nursing intervention classification system are: (Select all that apply.)
 1. Helps demonstrate the impact that nurses have on the health care delivery system.
 2. Assists educators to develop curricula that better articulates with clinical practice.
 3. Standardizes and defines the knowledge base for nursing curricula and practice.
 4. Facilitates the appropriate selection of a nursing intervention and communication of nursing treatments to other nurses and other providers.
 5. Promotes the development of a reimbursement system for nursing services.

2. A taxonomy of nursing outcome statements were developed to describe measurable states, behaviors, or perceptions to respond to which part of the nursing process?
 1. Nursing assessments
 2. Nursing interventions
 3. Nursing goals
 4. Nursing outcomes

CHAPTER 14

IMPLEMENTING AND EVALUATING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--|--|
| 1. _____ Audit | a. Process for identifying the factors that bring about deviations in practices that lead to a sentinel event |
| 2. _____ Cognitive skills | b. Evaluation of a client's record after discharge from an agency |
| 3. _____ Concurrent audit | c. Focuses on the setting in which the care was given |
| 4. _____ Evaluating | d. Focuses on demonstrable changes in the client's health status as a result of nursing care |
| 5. _____ Evaluation statement | e. Unexpected event that involves death or serious physical or psychological injury, or risk thereof |
| 6. _____ Implementing | f. Purposeful hands-on skills |
| 7. _____ Interpersonal skills | g. Include problem solving, decision making, thinking and creativity |
| 8. _____ Outcome evaluation | h. All of the activities, verbal, and nonverbal, people use when interacting directly with one another |
| 9. _____ Process evaluation | i. Ongoing, systematic approach with the focus on improving quality of care |
| 10. _____ Quality-assurance (QA) program | j. Review of a client's health care while the client is still receiving care |
| 11. _____ Quality improvement (QI) | k. Focuses on how care was given |
| 12. _____ Retrospective audit | l. Planned ongoing activity in which the client and health care professionals determine the client's progress toward achievement of goals and effectiveness of nursing care plan |
| 13. _____ Root cause analysis | m. Consists of two parts: a conclusion and supporting data |
| 14. _____ Sentinel event | n. Review of records |
| 15. _____ Structure evaluation | o. Consists of doing and documenting the activities that are specific nursing actions to carry out intervention |
| 16. _____ Technical skills | p. Ongoing, systematic process designed to evaluate and promote excellence in the health care provided to clients. |

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KEY TOPIC REVIEW

1. The nursing process is _____ oriented, _____, and _____ directed.
2. According to NIC terminology, _____ consists of doing and documenting the activities that are specific nursing actions needed to carry out the interventions.
3. _____, _____, and _____ skills are used to implement nursing strategies.
4. When does the implementing phase terminate?
5. The first three nursing phases of _____, _____, and _____ provide the basis for the nursing actions performed during the implementing step.

Match the type of skill with the following activities.

- | | |
|-------------------------|---|
| a. Cognitive skills | 6. _____ "May I help you to the restroom?" |
| b. Interpersonal skills | 7. _____ Creativity |
| c. Technical skills | 8. _____ Problem solving |
| | 9. _____ Nurse working effectively with members of the health care team |
| | 10. _____ Taking a blood pressure |
| | 11. _____ Caring for a dying patient |
| | 12. _____ Need self-awareness and sensitivity to others to perform this skill |
| | 13. _____ Bandaging a client's leg |

14. What is included in the five processes of implementing?
 - a.
 - b.
 - c.
 - d.
 - e.
15. Nursing activities are communicated verbally as well as in writing.
 - a. True
 - b. False

FOCUSED STUDY TIPS

1. What are the guidelines for implementing nursing interventions?
2. What are the five components of the evaluation process?
3. What are the two components of an evaluation statement?
4. Explain the difference between quality improvement and quality assurance.
5. Why should the nurse never document in advance?

CASE STUDY

Mr. Raymond Sanchez is a 57-year-old man who has been diagnosed with pancreatic cancer. He has been hospitalized for weight loss and pain control. No further chemotherapy or treatment is planned. Answer the following questions about Mr. Sanchez.

1. List different potential nursing diagnoses for Mr. Sanchez, give an example of subjective and objective data, and list one nursing intervention for each diagnosis.
2. List other comfort measures that the nurse may implement for Mr. Sanchez.

REVIEW QUESTIONS

1. Evaluation of the client's health care while the client is still receiving care from the agency is called a:
 1. retrospective audit.
 2. audit.
 3. concurrent audit.
 4. peer review.
2. Basic nursing interventions are based on:
 1. scientific knowledge, nursing research, and evidence-based practice.
 2. creative thinking and intuition.
 3. physician's orders.
 4. client's wishes and nursing research.
3. Which of the following is the fifth and last phase of the nursing process?
 1. Evaluating
 2. Assessment
 3. Planning
 4. Implementing
 5. Diagnosing
4. The nurse documents that the goal or desired outcome was met, partially met, or not met. What part of the evaluation statement is the nurse documenting?
 1. Supporting data
 2. Collecting data
 3. Finale
 4. Conclusion
5. While implementing the plan of care for the client, the nurse should:
 1. supervise unlicensed support personnel who provide care to the client.
 2. complete every task for the client including bathing, measuring intake and output, and room cleaning services.
 3. complete a retrospective audit.
 4. supervise and direct the physician providing care.
 5. evaluate the client's reactions to the planned interventions.

6. What is meant by the nurse using interpersonal skills?
 1. These skills include problem solving, decision making, critical thinking, and creativity.
 2. These skills include all of the activities, verbal and nonverbal, that people use when interacting directly with one another.
 3. These skills include manipulating equipment, giving injections, bandaging, etc.
 4. These skills include leadership management and delegation.
7. In which of the following situations does the nurse need assistance with implementing the nursing interventions?
 1. A nurse applying Buck's traction for the fifth time
 2. A nurse who has just begun working in the hospital
 3. A nurse who turns the client in bed without the client experiencing discomfort
 4. A nurse transferring a bilateral amputee from bed to chair
8. What are two nursing phases that overlap each other in the nursing process?
 1. Assessing; diagnosing
 2. Planning; implementing
 3. Implementing; evaluation
 4. Evaluating; assessing
9. The nurse writes an evaluation statement after determining whether a nursing goal or client outcome has been met. What are the two parts in an evaluation statement?
 1. Conclusion and implementation
 2. Conclusion and supporting data
 3. Implementation and summary
 4. Implementation and data analysis
10. A quality-assurance (QA) program evaluates and promotes excellence in the health care provided to clients. Select the three components of care that are reviewed during this process from the following:
 1. Structure evaluation
 2. Process evaluation
 3. Outcome evaluation
 4. Internal processes and external agency evaluations

CHAPTER 15

DOCUMENTING AND REPORTING

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--------------------------------------|--|
| 1. _____ Change-of-shift report | 21. _____ Source-oriented record |
| 2. _____ Chart | 22. _____ Variance |
| 3. _____ Charting | |
| 4. _____ Charting by exception (CBE) | a. Chart entry made by all health professionals involved in a client's care |
| 5. _____ Client record | b. Formal legal document that provides evidence of a client's care |
| 6. _____ Discussion | c. Concise method of organizing and recording data about a client making information quickly accessible to all health professionals |
| 7. _____ Documenting | d. Client record |
| 8. _____ Flow sheet | e. Consists of notes that include routine care, normal findings, and client problems |
| 9. _____ Focus charting | f. Chart or record that can be written or computer based |
| 10. _____ Handoff communication | g. Process in which information about patient care is communicated in a consistent manner including an opportunity to ask and respond to questions |
| 11. _____ Kardex | h. A goal not met in a critical pathway |
| 12. _____ Narrative charting | i. Problem-oriented record |
| 13. _____ PIE | j. Data are arranged according to the problems a patient has rather than the source of the information |
| 14. _____ POMR | k. Process of charting or documenting |
| 15. _____ POR | l. Uses specific assessment criteria in a particular format |
| 16. _____ Progress note | m. Acronym for subjective, objective, assessment and plan |
| 17. _____ Record | n. Makes client concerns and strengths the focus of care, usually using three columns. |
| 18. _____ Recording | |
| 19. _____ Report | |
| 20. _____ SOAP | |

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- j. Informal oral consideration of a subject by two or more health care personnel to identify a problem or establish strategies to resolve a problem
- k. Each person or department makes notations in a separate section of the client's chart
- l. Process of charting or re-recording
- m. Purpose is to provide continuity of care for clients by providing critical information to oncoming nurses
- n. Process of making an entry on a client record
- o. Documentation system in which only abnormal or significant findings are recorded
- p. Acronym for problems, interventions, and evaluation of nursing care
- q. Oral, written, or computer-based communication intended to convey information to others

KEY TOPIC REVIEW

1. The client's record is protected legally as a private record of the client's care. Access to the client's record is limited to:
 - a. family members.
 - b. only the physician.
 - c. the physician and client.
 - d. health care professionals delivering care and the client.
2. The nurse has a _____ and _____ to maintain confidentiality of the client's record.
3. Identify the purposes of client records:
 - a.
 - b.
 - c.
 - d.
 - e.
 - f.
 - g.
 - h.
4. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires client record documentation to be:
 - a.
 - b.
 - c.
 - d.
 - e.
5. What measures should be taken when faxing confidential health information? Is consent needed? What should be done before hitting the "send" button?

6. Students or graduates are not bound by a strict ethical code and legal responsibility to hold all information in confidence.
 - a. True
 - b. False
7. Describe source-oriented records. What is a traditional part of source-oriented records?
8. List the advantages and disadvantages of source-oriented charting.
9. What is a problem-oriented medical record (POMR) or problem-oriented record (POR)? What are the four components of POMR?
10. List the advantages and disadvantages of POMR charting.
11. What is the SOAP format that is used in charting and progress notes? What is meant by the acronyms SOAPIE and SOAPIER?
12. Explain how charting by exception (CBE) works, and explain why some nurses are uncomfortable with this method. What are the three elements of CBE?
13. What are the advantages and disadvantages of case management?

FOCUSED STUDY TIPS

1. Explain the Security Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
2. Name four suggestions for ensuring confidentiality and security of computerized records.
3. What is the PIE system of charting?
4. How does focus charting work? What are its advantages?
5. Refer to Box 15–2 in the textbook. Review the pros and cons of computer documentation. Do you agree with this information?
6. What are the requirements for documentation in a long-term care facility?

CASE STUDIES

1. While charting, a nurse notices that she has made an error. She did not write the correct oral temperature down. It should have been 98 degrees orally instead of 101 degrees orally. Demonstrate the correct way to correct the following note:
 12/04/06 09:10 am Pt stated "I am coughing so bad I am coughing junk up." respirations 28 breaths/minute; temp 101 degrees orally; v/s 140/76 Lt arm; sitting; pulse 96 per min.; no use of accessory muscles noted—
 D. Smith, RN BSN
2. Mrs. Berman presented to the emergency room, stating that she normally drinks a quart of vodka daily, but has been unable to afford alcohol for the previous 3 days. She states that she is feeling shaky, and her skin is itchy. Vitals signs are: 138/90, P of 104, respiratory rate 28, T 100.3°F. What should be included in the shift report for the next shift?

REVIEW QUESTIONS

1. What is used to organize client data, and allows quick access for health care professionals to review information regarding the client?
 1. End-of-shift report
 2. SOAPIER notes
 3. Variance reports
 4. Kardex
2. In long-term care facilities, what are the two types of care provided?
 1. Easy
 2. Skilled
 3. Intermediate
 4. Unskilled
 5. Hard
 6. Critical
3. Which of the following clients would require more frequent documentation by the nurse?
 1. Stable, delivered OB client who is 2 days post-vaginal delivery
 2. A client presenting to the emergency department with signs/symptoms of a viral respiratory problem
 3. An 86-year-old female postoperative day 4 of a hip replacement
 4. A 55-year-old male admitted to the ICU after a major myocardial infarction
4. If the nurse makes an error while charting, which is the recommended method to correct the mistake?
 1. Use "correction fluid" and obliterate the error.
 2. Draw one line through the error and write "mistaken entry" above it, then sign your name or initials beside it.
 3. Draw one line through the error and write "error" above it, then sign your initials beside it.
 4. Do nothing and hope no one notices the error.
5. The client has refused to have a Foley catheter inserted after surgery. As the nurse, what would need to be charted in the client's chart?
 1. The client refused the Foley catheter. The client was educated about the need for the Foley and the consequences of refusing the treatment; client verbalized understanding of the education.
 2. The client stubbornly refused the Foley catheter insertion.
 3. The client was medicated and the Foley was inserted without difficulty.
 4. The client refused the Foley catheter.
6. Identify the three purposes of charting.
 1. To fill up the nurse's spare time
 2. To communicate care and responses to care
 3. To create a legal document
 4. To demonstrate what the nurse did every moment of the shift
 5. To provide a basis for evaluation
7. The student nurse is learning to chart effectively in the clinical setting. The student nurse can do which of the following to increase her knowledge?
 1. Chart and hope it is correct.
 2. Practice charting and hope it will improve with time.
 3. Do nothing now and learn charting after graduation.
 4. Read charts to learn from actual situations.

8. Identify the correct example of documentation recording a client situation. The nurse charts:
 1. The client was shouting "I am so mad that I am going to hit you if you come any closer."
 2. The client seems angry and moderately aggressive.
 3. The client is angry and shouting.
 4. The client stated that he was mad and wanted to hit someone.
9. During the change-of-shift report, the nurse reports that the client is having "respiratory difficulty." What should the nurse add to this report?
 1. "But she seems okay."
 2. "Her respiratory rate is up to 28 breaths/min; oral temperature is 100 degrees; heart rate is 96 beats/minute; O2 saturation of 90%."
 3. "And I put her on 3 liters of oxygen."
 4. "I called the doctor but he didn't do anything."
10. When the nurse places a check mark or a dash in an allocated space and uses an asterisk to reflect other pertinent information that has been recorded elsewhere on the chart, this is an example of what type of documentation?
 1. Multidisciplinary charting
 2. Charting by exception
 3. Focus charting
 4. Flow-sheet charting
11. What measures can the nurse take to maintain confidentiality of the client records? (Select all that apply.)
 1. Personal passwords are not shared with anyone else.
 2. Never leave the computer unattended after logging into the system.
 3. Do not leave paperwork with the client's information in an unsecured location.
 4. Discard all unneeded computer-generated worksheets in the trash can.
 5. Know the facility's policy and procedure for correcting an entry error.
 6. Only use the client's social security number and the initials of the client.
12. Identify examples that health care professionals may use in order to communicate specific information regarding the client or the client's care.
 1. Change-of-shift report
 2. Discussing the client's care in the cafeteria
 3. Contacting the physician via telephone regarding new orders for medication to decrease an increased temperature
 4. Care plan conferences
 5. A laboratory report for the client

CHAPTER 16

HEALTH PROMOTION

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--|--|
| 1. _____ Action stage | 19. _____ Positive feedback |
| 2. _____ Boundary | 20. _____ Precontemplation stage |
| 3. _____ Closed system | 21. _____ Preparation stage |
| 4. _____ Compensatory | 22. _____ Primary prevention |
| 5. _____ Contemplation stage | 23. _____ Psychological homeostasis |
| 6. _____ Disease prevention | 24. _____ Secondary prevention |
| 7. _____ Equilibrium | 25. _____ Self-regulation |
| 8. _____ Feedback | 26. _____ System |
| 9. _____ Health promotion | 27. _____ Termination stage |
| 10. _____ Health protection | 28. _____ Tertiary prevention |
| 11. _____ Health risk assessment (HRA) | 29. _____ Throughput |
| 12. _____ Holism | 30. _____ Wellness diagnosis |
| 13. _____ Homeostasis | a. Provide a clear focus for planning interventions without indicating a problem exists |
| 14. _____ Input | b. Focuses on early identification of health problems, prompt intervention |
| 15. _____ Maintenance stage | c. Assessment and educational tool that indicates a client's risk for disease or injury during the next 10 years |
| 16. _____ Negative feedback | d. Person has complete confidence that the problem is no longer a temptation or threat |
| 17. _____ Open system | e. Generalized health promotion and specific protection against disease |
| 18. _____ Output | f. Energy, matter, and information move into and out of the system through the system boundary |

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- g. Inhibits change
- h. Person acknowledges having a problem, seriously considers changing a specific behavior, verbalizes a plan to change
- i. Person does not think about changing his or her behavior in the next 6 months
- j. Focus on restoration and rehabilitation
- k. Mechanism by which some of the output of a system is returned to the system as input
- l. Information, material or energy that enters the system
- m. Emphasizes the whole person and how one area of concern relates to the entire person
- n. Person strives to prevent relapse by integrating adopted behaviors into his or her lifestyle
- o. Homeostatic mechanisms come into play automatically
- p. Energy, matter or information given out by the system as a result of its processes
- q. Behavior motivated by a desire to actively avoid illness
- r. Disease prevention
- s. Behavior motivated by the desire to increase well-being
- t. Describes the relative constancy of the internal processes of the body
- u. A set of interacting identifiable parts
- v. Does not exchange information with its environment
- w. Processing input in a way useful to the system
- x. A real or imaginary line that differentiates one system from another
- y. Emotional or psychological balance
- z. Occurs when the person actively implements behavioral and cognitive strategies
- aa. Counterbalancing
- bb. Balance
- cc. Stimulates change
- dd. The person intends to take action in the immediate future

KEY TOPIC REVIEW

1. List four main characteristics of homeostatic mechanisms.
2. The nurse must consider all components of health in order to ensure holistic health care. What are the components of health?
3. Maslow, a renowned needs theorist, ranks human needs on five levels. List the levels in ascending order and give an example of a need in each level.
4. What did Richard Kalish add to Maslow's hierarchy of needs, where did he add it, and why did he add it?
5. *Healthy People 2020: Understanding and Improving Health* (U.S. Department of Health and Human Services [USDHHS]) presents a comprehensive 5-year strategy for promoting health and preventing illness, disability, and premature death.
 - a. True
 - b. False
6. List the two major goals of *Healthy People 2020* and what is reflected by those goals.
7. Health-promoting behavior is directed toward attaining positive health outcomes for the client.
 - a. True
 - b. False

8. How do health promotion plans need to be developed to encourage clients to participate in their care?
9. To encourage a client to quit smoking, what implementations should the nurse use? Describe the nurse's behaviors while implementing the plan.
10. Which of the following should be included in a client's lifestyle assessment that would be relevant to his or her health care?
 1. Nutrition
 2. Physical activity
 3. Drug, alcohol, and cigarette smoking habits
 4. Spirituality
 5. Marital status

FOCUSED STUDY TIPS

1. How does understanding developmental stage theories enable the nurse to provide knowledgeable care?
2. As a nurse, what is your role in health promotion? How can you enhance health promotion actions in your community?
3. Discuss the health promotion model. Refer to the textbook, Figure 16-4.
4. When exploring the stages of change, is change always linear? Why or why not? Why is it important for nurses to understand the stages of change?
5. What is the nurse's role in health promotion? Do you believe that the nurse should be a good role model for healthy living? How would you feel if a nurse who never exercises is attempting to instruct you (a client) in the importance of exercise?

CASE STUDY

Evaluate your own risk for health concerns.

1. What types of illnesses are apparent in your family history?
2. What actions could you take to prevent the development of the identified health concerns?
3. What types of health promotion could you utilize to increase your own good health?
4. Identify a site for your identified health problem for related health promotion activities.

NCLEX® REVIEW QUESTIONS

1. A client reports that he believes he will "never kick the habit" of smoking because he has tried before and failed. Using the transtheoretical model (TTM), what stage of health behavior change is the client functioning in?
 1. Preparation stage
 2. Contemplation stage
 3. Termination stage
 4. Action stage

5. Precontemplation stage
6. Maintenance stage
2. Identify which of the following is the most basic type of health promotion activity. (Select all that apply.)
 1. A billboard promoting abstinence to prevent sexually transmitted diseases and unplanned pregnancies
 2. A wellness assessment program
 3. An environmental control program about pesticide uses
 4. A nurse who models healthy lifestyle behaviors
 5. A school of nursing that is holding a blood pressure fair
3. The nurse refers a new below-the-knee (BKA) amputation client to a support group for amputees. This is an example of what type of prevention?
 1. Primary
 2. Secondary
 3. Tertiary
 4. Terminal
4. The nurse is providing health education about injury and poisoning prevention to a group of young mothers at a health fair. What type of prevention is the nurse conducting?
 1. Primary prevention
 2. Secondary prevention
 3. Tertiary prevention
 4. Limited prevention
5. A client had surgery for gastrointestinal problems and required a colostomy from the surgery. What type of preventive care would this client need at this stage?
 1. Primary prevention
 2. Secondary prevention
 3. Tertiary prevention
 4. Limited prevention
6. A school nurse is teaching a group of seniors about self-examination techniques for breast and testicular cancer in their health class. What type of health care prevention is the school nurse teaching?
 1. Primary prevention
 2. Secondary prevention
 3. Tertiary prevention
 4. Limited prevention
7. Pender's health promotion model would benefit which of the following clients?
 1. An active 21-year-old client who does not smoke or drink alcohol
 2. A 50-year-old client who exercises four times a week
 3. A 32-year-old who has yearly breast exams and other routine health screenings
 4. An overweight 29-year-old who engages in risky behaviors

8. A client has complete confidence that she has learned health behaviors that will enable her to maintain her current health status by exercising three to five times a week, monitoring her dietary intake, and by no longer engaging in risky behaviors. What stage of health behavior change is this client experiencing?
 1. Maintenance
 2. Action
 3. Preparation
 4. Termination
9. The client is attending Alcoholics Anonymous (AA) meetings for support to assist in remaining sober. It is anticipated that the client will remain in this group for several years. What stage of health behavior change is this client experiencing?
 1. Maintenance
 2. Action
 3. Preparation
 4. Termination
10. Who is responsible for developing health promotion plans?
 1. Physician
 2. Family
 3. Client
 4. Nurse

CHAPTER 39

SELF-CONCEPT

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|--------------------------------|--|
| 1. _____ Body image | a. A set of expectations about how the person occupying one position behaves |
| 2. _____ Core self-concept | b. Arise from opposing or incompatible expectations |
| 3. _____ Global self | c. How a person in a particular role acts in comparison to the behaviors expected of that role |
| 4. _____ Global self-esteem | d. One's judgment of one's own worth; how one compares to others, and ideal self |
| 5. _____ Ideal self | e. Refers to the relationship between one's perception of self and others' perceptions of him or her |
| 6. _____ Role | f. When expectations are unclear, people do not know what to do or how to do it |
| 7. _____ Role ambiguity | g. The beliefs and images that are most vital to the person's identity |
| 8. _____ Role conflicts | h. How much one likes oneself as a whole |
| 9. _____ Role development | i. One's mental image of oneself |
| 10. _____ Role mastery | j. A person's behaviors meet social expectations for a role |
| 11. _____ Role performance | k. The image of physical self; size, appearance, and functioning of the body and its parts |
| 12. _____ Role strain | l. Socialization into a role |
| 13. _____ Self-awareness | m. Collective beliefs and images one holds about oneself; most complete descriptions that individuals can give of themselves |
| 14. _____ Self-concept | n. How we should or would prefer to be |
| 15. _____ Self-esteem | o. How much one approves or likes a certain part of oneself |
| 16. _____ Specific self-esteem | p. Occurs when one is frustrated because he or she feels or is made to feel inadequate or unsuited to a role |

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KEY TOPIC REVIEW

1. Self-concept is one's mental image of oneself.
 - a. True
 - b. False
2. A patient's attitude to a newly acquired disability is rarely the determining factor in successful rehabilitation.
 - a. True
 - b. False
3. Individuals who grow up in families whose members value each other are likely to feel good about themselves.
 - a. True
 - b. False
4. The weavings that form the patterns in one's life are experiences, knowledge, and dreams.
 - a. True
 - b. False
5. Self-awareness refers to the relationship between one's perception of himself or herself and others' perceptions of him or her.
 - a. True
 - b. False
6. A _____ self-concept is essential to a person's physical and psychological well-being.
7. Self-esteem is derived from _____ and others.
8. _____ self-esteem is how much one approves of a certain part of oneself.
9. Nursing interventions to promote a positive self-concept include helping a client to identify areas of _____.
10. A person's self-perception can differ from the person's perception of how others see him or her and from the _____ self, that is, how the person would like to be.
11. Match the following terms with the correct definitions.

| | | |
|-----------------------|-------|---|
| a. Ideal self | _____ | Occurs when expectations are unclear, and people do not know what to do or how to do it and are unable to predict the reactions of others to their behavior |
| b. Body image | _____ | Involves socialization into a particular role |
| c. Role mastery | _____ | Means that the person's behaviors meet social expectations |
| d. Role development | _____ | Relates what a person in a particular role does to the behaviors expected of that role |
| e. Global self-esteem | _____ | A set of expectations about how the person occupying one position behaves |
| f. Role ambiguity | _____ | The image of physical self—how a person perceives the size, appearance, and functioning of the body and its parts |
| g. Self-awareness | _____ | The conscious sense of individuality and uniqueness that is continually evolving throughout life |

- h. Role performance _____ How we should be or would prefer to be
 - i. Role _____ Refers to the relationship between one's perception of himself or herself and others' perceptions of him or her
 - j. Personal identity _____ How much one likes one's self as a whole
12. Which of the following would NOT be considered a stress that affects self-concept?
 - a. Loss of body parts
 - b. Lack of positive feedback from significant others
 - c. Abusive relationship
 - d. Loss of financial security
 13. Which of the following is NOT one of Erikson's stages of psychosocial development?
 - a. Infancy: trust vs. mistrust
 - b. Toddlerhood: autonomy vs. shame and doubt
 - c. Early childhood: initiative vs. guilt
 - d. Early adulthood: segregation vs. separation
 14. _____ is one's judgment of one's own worth, that is, how that person's standards and performances compare to others and to one's ideal self.
 - a. Self-esteem
 - b. Self-knowledge
 - c. Self-expectation
 - d. Self-concept
 15. All of the following would be considered an identity stressor EXCEPT:
 - a. change in physical appearance.
 - b. inability to achieve goals.
 - c. sexuality concerns.
 - d. ambiguous or conflicting role expectations.
 16. Which one of the following is NOT one of the four dimensions of self-concept?
 - a. Self-knowledge
 - b. Social evaluation
 - c. Self-expectation
 - d. Self-evaluation

FOCUSED STUDY TIPS

1. List some strategies nurses can employ to reinforce strengths.
2. Discuss the stage of development as a factor that can affect self-concept.
3. Discuss the concept of body image, including how and when it develops.
4. List some of the guidelines for conducting a psychosocial assessment.

5. Discuss family and culture and how they can affect self-concept.
6. Define and discuss personal identity.
7. Discuss the formation of self-concept according to Erickson.
8. List three of the NANDA nursing diagnostic labels relating specifically to the domain of self-perception and the classes of self-concept, self-esteem, and body image.
9. Discuss stressors as a factor that can affect self-concept.
10. People are thought to base their self-concept on how they perceive and evaluate themselves in several areas. List some of these areas.
11. Discuss resources and how they can affect self-concept.
12. Discuss illness and how it can affect self-concept.
13. Give some examples of questions a nurse can ask to determine a client's self-esteem.
14. List some nursing techniques that may help clients analyze the problem and enhance the self-concept.

CASE STUDY

You are working in a psychiatric facility. One of the clients you are caring for is elderly. The client told you she has low self-esteem.

1. What nursing techniques may help clients analyze the problem and enhance self-concept?
2. List five stressors that affect self-concept.
3. During your assessment, what questions should you ask the client?

NCLEX® REVIEW QUESTIONS

1. When planning interventions to reinforce a client's strengths, which of the following would NOT be included in the client's plan of care?
 1. Stress self-negation rather than positive thinking.
 2. Notice and verbally reinforce client strengths.
 3. Provide honest, positive feedback.
 4. Encourage the setting of attainable goals.
2. The nurse is conducting a psychosocial assessment. Which of the following actions by the nurse is correct?
 1. Create a quiet, private environment.
 2. Do not limit interruptions.
 3. Sporadic eye contact.
 4. Sit above the eye level of the client.

3. A nurse is planning a seminar on conducting a psychosocial assessment. Which of the following guidelines is appropriate for conducting a psychosocial assessment?
 1. Indicate acceptance of the client by not criticizing, frowning, or demonstrating shock.
 2. Ask close-ended questions.
 3. Maximize the writing of detailed notes during the interview.
 4. Ask more personal questions than what are actually needed.
4. A nurse is evaluating a nursing student who is asking a client questions to determine the client's self-esteem. Which of the following statements demonstrates a need for further teaching?
 1. "Are you satisfied with your life?"
 2. "How do you feel about yourself?"
 3. "Are you accomplishing what you want?"
 4. "What are your responsibilities in the family?"
5. During discharge planning, the nurse is teaching the client how to enhance her son's self-esteem. Which of the following actions is correct?
 1. Give him opportunities to "practice" who he is.
 2. Do not allow him to explore and experiment with the world around him.
 3. Do not allow him to express himself as a unique individual.
 4. Encourage him to stay connected with all memories.
6. Which of the following questions is NOT appropriate for the nurse assessing body image?
 1. Is there any part of your body you would like to change?
 2. What are your relationships like with your other relatives?
 3. Are you comfortable discussing your surgery?
 4. How do you feel about your appearance?
7. Ideal self is:
 1. the collective beliefs and images one holds about oneself.
 2. how a person perceives the size, appearance, and functioning of the body and its parts.
 3. the individual's perception of how one should behave based on certain personal standards, aspirations, goals, and values.
 4. one's mental image of oneself.
8. According to Erikson's stages of psychosocial development, the middle adulthood stage is:
 1. identity vs. role confusion.
 2. intimacy vs. isolation.
 3. integrity vs. despair.
 4. generativity vs. stagnation.
9. When a client feels or is made to feel inadequate or unsuited to a role, he or she is experiencing which of the following?
 1. Role conflict
 2. Role strain

3. Role ambiguity
 4. Role development
10. Which of the following is considered to be a stressor affecting self-concept?
1. Change or loss of job or other significant role
 2. Financial security
 3. Stable relationship
 4. Realistic expectations

CHAPTER 40

SEXUALITY

KEY TERM REVIEW

Match each term with its appropriate definition.

- | | |
|---|------------------------------------|
| 1. _____ Anal stimulation | 17. _____ Male orgasmic disorder |
| 2. _____ Androgyny | 18. _____ Masturbation |
| 3. _____ Body image | 19. _____ Menstruation |
| 4. _____ Cross-dressing | 20. _____ Oral-genital sex |
| 5. _____ Desire phase | 21. _____ Orgasmic phase |
| 6. _____ Dysmenorrhea | 22. _____ Resolution phase |
| 7. _____ Dyspareunia | 23. _____ Sexual aversion disorder |
| 8. _____ Excitement phase | 24. _____ Sexual orientation |
| 9. _____ Female orgasmic disorder | 25. _____ Sexual self-concept |
| 10. _____ Female sexual arousal disorder | 26. _____ Transgender |
| 11. _____ Gender identity | 27. _____ Vaginismus |
| 12. _____ Gender-role behavior | 28. _____ Vestibulitis |
| 13. _____ Genital intercourse | 29. _____ Vulvodynia |
| 14. _____ Hypoactive sexual desire disorder | |
| 15. _____ Intersex | |
| 16. _____ Male erectile disorder | |
-
- | |
|--|
| a. Involuntary climax or sexual tension, with physiological and psychological release |
| b. Sexual response stops before orgasm occurs |
| c. Excitation of own or another's genital organs by means other than sexual intercourse |
| d. Flexibility in gender roles; belief that characteristics and behaviors are human qualities not to be limited to a specific gender |
| e. Outward expression of a person's sense of maleness or femaleness |
| f. Period of return to unaroused state |

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- g. Lack of vaginal lubrication causes discomfort or pain during sexual intercourse
- h. Severe pain only on touch or attempted vaginal entry
- i. Painful menstruation
- j. Constant, unremitting burning that is localized to the vulva with an acute onset
- k. Contradictions among chromosomal gender, gonadal gender, internal organs, and external genital appearance
- l. A central part of self; how one feels about his or her appearance
- m. How one values oneself as a sexual being
- n. One's self-image as a female or male
- o. A person whose sexual anatomy is not consistent with gender identity
- p. The beginning of the sexual response cycle, with conscious sexual desires
- q. Persistently low or lack of interest in sexual activity
- r. Diagnosis when man has erection problems during 25% or more of his sexual interactions
- s. Painful sexual intercourse
- t. Penile-vaginal intercourse (for heterosexual couples)
- u. Kissing, licking, or sucking male or female genitals
- v. Can be a source of sexual pleasure because of the rich nerve supply in the anus
- w. A severe distaste for sexual activity, or the thought of sexual activity, which leads to a phobic avoidance of sex
- x. Erection can be attained and maintained, but ejaculation is extremely difficult
- y. Monthly uterine bleeding
- z. Dressing in the clothing of the other sex; makes outward appearance consistent with inner identity
- aa. One's attraction to people of the same sex, other sex, or both sexes
- bb. Characterized by two physiological changes, vasocongestion, and myotonia
- cc. Involuntary spasm of the outer one-third of the vaginal muscles, making penetration of the vagina painful, and sometimes impossible

KEY TOPIC REVIEW

1. The development of sexuality begins with conception and ends with puberty.
 - a. True
 - b. False
2. The ability of the human body to experience a sexual response is present before birth.
 - a. True
 - b. False
3. Although it is difficult to apply statistical data on large populations to local populations, it is generally accepted that sexual experimentation is currently occurring at ages older than in previous decades.
 - a. True
 - b. False
4. Sexually transmitted infections (STIs) are the most common bacterial infections among adolescents.
 - a. True
 - b. False
5. Older women remain capable of multiple orgasms and may, in fact, experience an increase in sexual desire after menopause.
 - a. True
 - b. False